

Employee Information and Update Sheet

New Employee Existing Employee

Company: _____

Employee Name: _____

Social Security Number: _____

Address: _____

City: _____ State: _____ ZIP: _____

Date of Birth: ____ / ____ / ____

Hire Date: ____ / ____ / ____

Date first worked: ____ / ____ / ____

Pay rate: _____ / hour or Salary: _____

Banking Information (if applicable):

Account: _____ Routing: _____

Checking Savings

Additional Deductions:

Item: _____ Amount/ check: _____

Item: _____ Amount/ check: _____

Item: _____ Amount/ check: _____

Item: _____ Amount/ check: _____

Provide the following documents:

- W4
- I-9
- Copy of Drivers' License
- Voided Check (if direct deposit)
- Garnishment/ Child Support notices