



EMPLOYEE SET-UP

COMPANY _____

NAME _____

ADDRESS _____

CITY/STATE/ZIP _____

HOME PHONE _____ CELL PHONE _____

SOC. SEC# _____ EMAIL _____

BIRTH DATE _____ HIRE DATE _____

EMPLOYEE ID # _____ TIME CARD # _____

SEX MALE FEMALE Non-Binary STATUS SINGLE MARRIED
(circle) (circle)

- ADMIN / HR DEPARTMENT -

Single or Married Filing Separately Married Filing jointly Head of Household
 Box 2C checked

(3) W-4 Dependents \$ _____ (4a) Other Income \$ _____ (4b) Deductions \$ _____

(4c) Extra Withholding \$ _____ Employee has written "EXEMPT" on the form YES NO

HOURLY RATE _____ SALARY RATE _____ FULL TIME YES NO
(CIRCLE)

DIVISION _____ BRANCH _____ DEPT _____

I hereby certify that the above information is verified and correct. I am authorized to provide this information and Unity HR is authorized to process payroll based on the information provided.

SIGNATURE _____ DATE _____

PRINT NAME _____ TITLE _____