## EMPLOYEE INFORMATION SHEET

Company Name						
GENERAL INFORMATION						
Employee Legal Name:						
Address:						
City, State Zipcode, County (NOT cour	ntry):					
SSN:		Birth Date:				
Email address (required for online paystubs):						
Phone Number:		Gender: ☐ Male ☐ Female ☐ Nonbinary				
Job Title / Department / Supervisor:						
Pay Frequency:   Weekly   B	□ Weekly □ Bi-weekly □		Semi-monthly   Monthly			
New Hire: ☐ Yes ☐ No	ew Hire:					
Workers Comp Class:						
PAY TYPES						
□ Salary per year □ Officer Wages □ Officer Distributions □ Hourly per hour □ 2 <sup>nd</sup> Hourly Name per hour □ 3 <sup>rd</sup> Hourly Name per hour □ VACATION PAY OR PT Hours Are Accrued: □ Each pay peri		os <sup>-</sup> axable) ent (Nontaxable) Per Diem	Company HSA Contribution Group Term Life Insurance S-Corp Owner Health Insurance Personal Use, Company Car Bereavement Pay Clergy Housing Other Other Other SICK PAY  ued: Each pay period			
□ Each hour worked		□ Each hour worked				
Hours Earned Per Year:		Hours Earned Per Year:				
Maximum Hours Allowed:		Maximum Hours Allowed:				
Current Balance:		Current Balance:				
DIRECT DEPOSIT INFORMATION						
Pay via Direct Deposit?   Yes   No   If yes, complete Authorization of Direct Deposit Form						
1. Bank Name (ATTACH VOIDED CHECK):						
Routing#:		Account#:				
☐ Checking ☐ Savings ☐ Other		Deposit: ☐Entire Check ☐\$ per paycheck				
2. Bank Name (ATTACH VOIDED CHECK):						
Routing#:		Account#:				
☐ Checking ☐ Savings ☐ Other		Deposit: ☐Remainder of paycheck				



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Employee Name					
BENEFITS: VOLUNTARY/INVOLUNTARY DEDUCTIONS AND CONTRIBUTIONS  CONTACT EASYTRACK IF NEW BENEFIT NEEDS SETUP.					
Type of Deduction	Carrier or Name of Deduction	Employee Deduction (\$ Amount or % of Gross Wages)	Company Contribution (\$ Amount or % of Gross Wages)		
		NEODMATION			
TAX INFORMATION  HAVE EMPLOYEE COMPLETE FORM W-4 AND KEEP ON FILE.					
<ul> <li>Nonresident Alien - Contact Easytrack, special rules and tax exemptions may apply</li> <li>US Citizen</li> </ul>					
Federal Withholdings:  Single or Married filing separately Married filing jointly (or Qualifying widow(er)) Head of Household Exempt (write EXEMPT under Step 4c on W-4)  Multiple Jobs (Step 2c box checked) Yes No  Dependents claimed, in dollars (Step 3) Other income (Step 4a) Deductions (Step 4b) Extra withholding (Step 4c)  Local Tax: (If applicable. Contact Easytrack if unsure and/or on		employee works outside Colora  Single or Married filing se Married Filing Jointly Head of Household Exempt  Additional withholdings \$	Head of Household  Exempt  Additional withholdings \$ (separate W-4 required)		
□ Denver □ Auro	ra 🗆 Greenwood Village 🗀 Glendal				
NOTES  TO DO: NEW HIRE CHECKLIST					
□ W-4					
□ I-9		☐ Photocopies of IDs on file?			
□ Direct Deposit Enro	Ilment Form	Receive Voided Check(s)?	□ Receive Voided Check(s)?		
□ Emergency Contact Form					
□ Provide CO Pregnant Workers Fairness Act Notice to Employee □ Have employee sign and retain for your records					
□ Provide FLSA Health Coverage Notice to Employee					
□ Colorado State Directory of New Hires Submitted: Fax Form to 303.297.2595 OR Submit Online at https://newhire.state.co.us/newhire/do					
□ Other State New Hire Forms (Contact Easytrack if employee works in state other than Colorado.)					
□ Enter employee info into Easytrack: Go to Employees tab, click Add an employee, and answer the questions. Then, click Edit in Employee Site Access section and check box to give access. Update QuickBooks Export Preferences, if applicable.					
□ Create Employee File to store all forms					

