## New Employee Information

Employer Complete	6		
□ New Hire □ Rehire F	Previous Name (if applicable)		
EMPLOYMENT DATA			
Job Title		Date of Hire	1 1
Rate of Pay			, , , , , , , , , , , , , , , , , , , ,
☐ Hourly ☐ Salaried ☐ Full-time ☐ Part-time			
☐ Seasonal - Scheduled Days and Hours			
Supervisor/Manager Signature		Date	1 1 :
			***************************************
Employee Complete			
PERSONAL DATA			
ast Name	First Name		Initial
Address			
City	State	Zip Code _	
elephone Number ()		Date of Birth	
ersonal E-mail Address (optional)		Wantania and Table and Tab	
MERGENCY CONTACT INFORMA			
ame		x.	
nployee Signature		Date	
011 Paychex, Inc.			4/11