ADP
A more human resource.℠

ADP-SBS-EI002

Employee Information Form

* Denotes required field

First Name *

MI

Last Name *

Address 1 *

Gender *
☐ Male   ☐ Female

Address 2

City *

State *

Zip *

Social Security Number *
☐☐☐ - ☐☐ - ☐☐☐☐

Date of Birth *
☐☐ / ☐☐ / ☐☐☐☐

Date of Hire *
☐☐ / ☐☐ / ☐☐☐☐

Email Address

Pay Rate (check one) *
☐ Hourly   ☐ Salary

Amount *
$ ☐☐☐☐☐ . ☐☐

Tax Status (check one) *
☐ W-2   ☐ 1099

Pay Frequency (check one) *
☐ Weekly   ☐ Bi-weekly   ☐ Semi-monthly   ☐ Monthly   ☐ Quarterly

Federal Filing Status (check one) *
☐ Single   ☐ Married   ☐ Married - at Higher Single Rate   Allowances ☐☐

Additional Federal Withholdings (check one) *
☐ Additional Amount Withheld   ☐ Flat $ Amount   ☐☐☐☐ . ☐☐
☐ Additional % Withheld   ☐ Flat % Amount   ☐☐ . ☐☐

State Filing Status (check one) *
☐ Same as Federal   ☐ Single   ☐ Married   ☐ Married - at Higher Single Rate   Allowances ☐☐

Additional State Withholdings (check one) *
☐ Additional Amount Withheld   ☐ Flat $ Amount   ☐☐☐☐ . ☐☐
☐ Additional % Withheld   ☐ Flat % Amount   ☐☐ . ☐☐

Direct Deposit Information

Bank Routing # *

Bank Routing #

Bank Account # *

Bank Account #

Account Type (check one) *
☐ Checking   ☐ Savings

Account Type (check one)
☐ Checking   ☐ Savings

Deposit Amount (check one) *
☐ Full Amount   ☐ Partial $ ☐☐☐☐ . ☐☐
☐ Partial % ☐☐ . ☐☐

Deposit Amount (check one)
☐ Remainder   ☐ Partial $ ☐☐☐☐ . ☐☐
☐ Partial % ☐☐ . ☐☐

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