EMPLOYEE INFORMATION SHEET

EMPLOYEE PERSONAL DATA

NAME:

ADDRESS:

STREET:

CITY:

STATE/ZIP **Email** _____

TELEPHONE #: **Cell #:**

BIRTH DATE: MM/DD/YY _____ **SOCIAL SECURITY #:** _____

SEX: M/F **MARITAL STATUS: M-D-S-W**

NEW HIRE EMPLOYMENT DATA

EMPLOYMENT DATE:

DEPARTMENT:

JOB TITLE:

SALARY: ANNUAL $_____ **HOURLY $**_____

EMPLOYMENT STATUS: FULL-TIME/ PART-TIME/TEMP (IF PART-TIME, # OF HOURS PER WEEK) _____

EMERGENCY NOTIFICATION

NAME: _____ **PHONE:** _____

RELATIONSHIP: _____ **WORK / CELL :**_____

NAME: _____ **PHONE:** _____

RELATIONSHIP: _____ **WORK / CELL:** _____