



New Hire Worksheet

EMPLOYEE:

---

<b>FIRST</b>	<b>MIDDLE</b>	<b>LAST</b>
--------------	---------------	-------------

---

<b>HOME ADDRESS</b>	<b>CITY, STATE, ZIP CODE</b>
---------------------	------------------------------

---

<b>SOCIAL SECURITY NUMBER</b>	<b>BIRTH DATE</b>	<b>COUNTY OF RESIDENCE</b>
-------------------------------	-------------------	----------------------------

---

<b>STATE YOU WILL BE WORKING IN</b>	<b>EMAIL ADDRESS</b>
-------------------------------------	----------------------

---

**TELEPHONE NUMBER**

---

**FEDERAL WITHHOLDING - Please attach Page 1 of the W4**

**STATE WITHHOLDING**

- Total Number of allowances you are claiming: \_\_\_\_\_
- Extra Withholding Amount: \_\_\_\_\_

**EMPLOYEE SIGNATURE** \_\_\_\_\_

---

EMPLOYER:

---

<b>NAME OF BUSINESS</b>	<b>EMPLOYER IDENTIFICATION NUMBER</b>
-------------------------	---------------------------------------

---

**BUSINESS ADDRESS**

---

<b>EMPLOYEE RATE:</b> _____	<b>HOURLY/ANNUAL/OTHER:</b> _____
<b>DATE OF HIRE:</b> _____	<b>DEPARTMENT:</b> _____
<b>JOB TITLE:</b> _____	<b>EMPLOYEE SOC CODE:</b> _____

<https://www.hoosierdata.in.gov/coder/>