



Company Name: _____

Employee Information

Hire Date: _____

(Required) Personal Information

Full Name: _____
Last First M.I.

Address: _____
Street Address Apartment/Unit #

City State ZIP Code

Home Phone: _____ ▲ SOC code: _____ Sex: **Male** **Female**

Email _____

SSN or Gov't ID: _____

Birth Date: / / Rate or Salary Amount \$ _____

Position Status: **Full-Time** **Part-Time** **Seasonal** **Variable** Ethnicity: _____

State Withholding: **Single / Married** Exemptions: _____ Federal Withholding: **Single / Married** Exemptions: _____

Additional Federal Withholding Amount: _____ Additional State Withholding Amount: _____

Additional Federal Withholding Percent: _____ Additional State Withholding Percent: _____

(Optional) Job Information

Employee ID: _____ Division/Branch Department : _____ / _____

Additional Information

▲ **Standard Occupational Classification (SOC) codes** – The Louisiana Workforce Commission now requires employers to provide an occupational SOC code for all employees, and you can find the listing for the codes at the following web URL:

http://www.bls.gov/soc/major_groups.htm

Additional Notes: