

ELECTIONS NEW EMPLOYEE DATA SHEET

Name		
Last	First	Middle Initial
Address		
Street	City	State Zip Code
Social Security Number		Hourly Rate
WITHHOLDING INFORMATION		GL Account
Dependents <u>Exempt From Withholding</u> <input type="checkbox"/>		Home Phone Number= Or Mobile Phone Number= <input type="checkbox"/> Unlisted
Marital Status <input type="checkbox"/> Single <input type="checkbox"/> Married		<input checked="" type="checkbox"/> Election Personnel <input type="checkbox"/> Part-Time <input type="checkbox"/> Temporary
Pay Type <input type="checkbox"/> <input checked="" type="checkbox"/> Hourly (PT) <input type="checkbox"/> Salary		Sex <input type="checkbox"/> Male <input type="checkbox"/> Female
Office Use Below		Office Use Below
Hire Date		EE04 Category EE04 Function
State Employment Code Date		ADDITIONAL COMMENTS
Worker's Comp Code Date		
DEDUCTIONS		
Retirement <input type="checkbox"/> Yes <input type="checkbox"/> No		
Administrative Services (Signature)		

You must be a registered Voter in Victoria County.

Copy of Driver's License and Social Security Card **REQUIRED**