

Employee Information Form

New employees complete sections 1, 3 and 4. The employer completes section 2. Tax, immigration, and bank details belong on the official forms and in your payroll system, not on this form.

1. PERSONAL DETAILS (EMPLOYEE COMPLETES)

LEGAL FIRST NAME	MIDDLE NAME	LEGAL LAST NAME
PREFERRED NAME	PRONOUNS (OPTIONAL)	
STREET ADDRESS		
CITY	STATE	ZIP CODE
MOBILE PHONE	OTHER PHONE	
PERSONAL EMAIL		
BEST WAY TO REACH YOU OUTSIDE WORK HOURS		
☐ Mobile call	☐ Text message	☐ Personal email

2. JOB DETAILS (EMPLOYER COMPLETES)

JOB TITLE	EMPLOYEE ID
DEPARTMENT OR TEAM	WORK LOCATION
MANAGER	START DATE
WORK EMAIL	WORK PHONE OR EXTENSION
EMPLOYMENT TYPE	
☐ Full-time	☐ Part-time
☐ Temporary	☐ Seasonal
PAY BASIS	
☐ Hourly	☐ Salary

EMPLOYEE INFORMATION FORM (CONTINUED)

3. EMERGENCY CONTACTS (EMPLOYEE COMPLETES)

List people we may call if you are hurt or become ill at work. Tell them you listed them.

CONTACT NAME	RELATIONSHIP	MOBILE PHONE	OTHER PHONE

4. EMPLOYEE CONFIRMATION

I confirm the information I provided is accurate. I will tell HR or my manager when my address, phone, or emergency contacts change.

EMPLOYEE: PRINTED NAME

SIGNATURE

DATE

FOR OFFICE USE

RECEIVED BY

DATE RECEIVED

ENTERED IN HR SYSTEM BY

DATE ENTERED

RELATED ONBOARDING ITEMS

- ☐ Offer letter on file
- ☐ Form I-9 process started
- ☐ Handbook acknowledgment received

- ☐ Tax withholding forms requested
- ☐ Direct deposit set up in payroll

NOTES (DO NOT RECORD MEDICAL DETAILS OR PROTECTED CHARACTERISTICS HERE)