New Employee Information Form

Employee Personal Details

|  |  |
| --- | --- |
| Full Name |  |
| Phone Number |  |
| Permanent Address |  |
| Secondary Address (if applicable) |  |
| Personal Email Address |  |
| Job Title |  |
| Department |  |
| Pay Rate |  |
| Last Pay Rate Increase (date and amount) |  |
| Start Date |  |
| End Date  (if applicable) |  |

Education & Work History

|  |  |
| --- | --- |
| Highest Degree or Diploma |  |
| Date of Graduation |  |
| Degree School |  |
| Prior Employment 1 (include last 3 jobs or past 10 years) | * [Company Name] * [Job Title] * [Dates of Employment] |
| Prior Employment 2 | * [Company Name] * [Job Title] * [Dates of Employment] |
| Prior Employment 3 | * [Company Name] * [Job Title] |

|  |  |
| --- | --- |
|  | * [Dates of Employment] |

Emergency Contact Information

|  |  |
| --- | --- |
| Primary Contact Full Name |  |
| Primary Phone Number |  |
| Secondary Phone Number |  |
| Relationship to Employee |  |
| Secondary Contact Full Name |  |
| Primary Phone Number |  |
| Secondary Phone Number |  |
| Relationship to Employee |  |

Confidential Employee Information

|  |  |
| --- | --- |
| Social Security Number |  |
| Other Relevant Information |  |