

Employee Payroll Enrollment Information Form

Employee Information

Full Name

Employee ID

Department

Position/Title

Date of Birth

Email Address

Phone Number

Address

Payroll Information

Employment Start Date

Pay Frequency

Select

Salary / Hourly Wage

Payment Method

Select

Bank Information (if Direct Deposit)

Bank Name

Account Holder Name

Account Number

Routing Number

Account Type

Select

Authorization

Employee Signature

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Date

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