

**DUBOIS AREA CATHOLIC SCHOOL INC
EMPLOYEE WORKSHEET**

Name: _____

FIRST

INITIAL

LAST

SS #: _____ **Gender: M / F**

DOB: _____ **Veteran: Y/N Status:** _____

Address: _____

Phone: _____ **Cell Phone:** _____

Emergency Contact Name: _____

Emergency Contact Phone: _____

OFFICE USE ONLY

Hire Date: _____ **Shift:** _____ **Department:** _____

Job Title: _____ **Starting Rate:** _____

Direct Deposit? Y / N **I-9 on file? Y / N** **W-4 on file? Y / N**

Local tax form on file? Y / N **Municipality Code:** _____ **at** _____ **%**

Start Date: _____

Name and Birthdates of Dependents:
