

# Millennium

## Payroll Solutions

Hassle Free Affordable Payroll Solutions

### EMPLOYEE INFORMATION FORM

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**Company:** \_\_\_\_\_

**Employee Location &/or Department:** \_\_\_\_\_

**Employee Last Name** \_\_\_\_\_ **First** \_\_\_\_\_ **Initial** \_\_\_\_\_

**Address** \_\_\_\_\_

**City** \_\_\_\_\_ **State** \_\_\_\_\_ **Zip** \_\_\_\_\_

**Birth** \_\_\_\_/\_\_\_\_/\_\_\_\_ **SSN** \_\_\_\_-\_\_\_\_-\_\_\_\_

**Status:**  Fulltime  Part-Time  Salary  1099 (contractor)

**Hire Date** \_\_\_\_/\_\_\_\_/\_\_\_\_  Male  Female

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**Pay Rate:** \_\_\_\_\_  Hourly  Salary

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**Additional Information:**

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