



Employee Data and Payroll Information

Instructions: Please fully complete the following information. New employees must complete the entire form.

New Employee Rehire Transfer Payroll Change Information Change

Employee No: _____ Sales No: _____ Division: _____ Department/Branch: _____

To Be Completed by Employee

Please Print Clearly

Name _____
First Last Middle Initial

Preferred/Nickname _____

Address _____

City _____ State _____ Zip _____

Soc. Sec. No. _____ Phone _____

Date of Birth _____ Gender Male Female

Married Single Number of Dependents _____

Personal Email Address _____

Are you a US citizen? Yes No

Ethnic Identification White Black Asian
 Hispanic American Indian

Military Status

1 year recently separated Vet Vietnam Era Vet
 Special Disabled Vet Other Protected Vet

Spouse's Name _____

Emergency Contact Name _____

Emergency Contact Address _____

Emergency Contact Phone _____

Driver's License Number _____

Expires _____

Do you have a Commercial Driver's License? Yes No

If yes, when does it expire? _____

Education

Circle the highest grade completed

9 10 11 12 13 14 15 16 17 18 19 20
|----High School----| |-----College-----| |---Graduate School---|

Highest degree earned _____

Subject _____

School Attended _____

Number of exemptions for tax purposes _____

Employee Signature _____

Date _____

To Be Completed by Supervisor

Employee Title _____

Job Code Description _____

Distribution _____ Worker's Compensation _____
(See reverse side) (See reverse side)

Payroll:

Hourly Hourly Amount: \$ _____
 Salaried Annual Amount: \$ _____
 Draw Bi-Weekly Amount: \$ _____

Effective date _____

Full-time Temporary Part-time
 Exempt Non-exempt
 PTO No PTO (Bargaining agreement)

If payroll change, give reason

Merit Promotion Demotion Union/Contract

Other _____

Hire Source

Advertising/Web Page Former Employee
 College Recruiting Employee Referral
 Employment Agency Search/Temporary Firm
 State Employment Service

Date employee applied with YESCO: _____

Next review date: _____

HR Signature _____

Date _____

Supervisor's Employee Number _____

Supervisor's Signature _____

Date _____

Workers' Compensation Codes

As of May 20th, 2013

Idaho

111 Mfg
112 Install / Service
113 Sales
115 Clerical / Office

Wyoming

151 Mfg
153 Sales
155 Clerical / Office

Arizona

201 Mfg
202 Install / Service
203 Sales
205 Clerical / Office

Mississippi

231 Mfg
232 Install / Service
233 Sales
235 Clerical / Office

Nevada

271 Mfg
272 Install / Service
273 Sales
275 Clerical / Office

Texas

211 Mfg
212 Service
213 Sales
215 Clerical / Office

Washington

371 Mfg
373 Sales
375 Clerical / Office

New Mexico

301 Mfg
302 Install / Service
303 Sales
305 Clerical / Office

Tennessee

191 Mfg
192 Install / Service
193 Sales
195 Clerical / Office

Oregon

361 Mfg
363 Sales
365 Clerical / Office

California

401 Mfg
402 Sign Erection / Install / Serv
403 Sales
405 Clerical / Office
406 Incandescent (Neon only)
407 Sign Painting & lettering / Vinyl Letters& Graphics
408 Elec Wiring
409 Conduit Const. / Sheet Mtl

Utah

431 Mfg
432 Install / Service
433 Sales
435 Clerical / Office

Colorado

501 Mfg
502 Install / Service
503 Sales
505 Clerical / Office

Louisiana

181 Mfg
183 Sales
185 Clerical / Office

Oklahoma

291 Mfg
292 Install / Service
293 Sales
295 Clerical / Office

Montana

121 Mfg
122 Install / Service
123 Sales
125 Clerical / Office

Georgia

281 Mfg
282 Install / Service
283 Sales
285 Clerical / Office

NEW YORK

101 Mfg
102 Install / Service
103 Sales
105 Clerical / Office

NEBRASKA

511 Mfg
512 Install / Service
513 Sales
515 Clerical / Office

WISCONSIN

161 Mfg
162 Install / Service
163 Sales
165 Clerical / Office

PENNSYLVANIA

171 Mfg
172 Install / Service
173 Sales
175 Clerical / Office

INDIANA

131 Mfg
132 Install / Service
133 Sales
135 Clerical / Office

MICHIGAN

241 Mfg
242 Install / Service
243 Sales
245 Clerical / Office

FLORIDA

223 Sales

North Carolina

143 Sales