

# CONFIDENTIAL EMPLOYEE RECORD

Employee Name \_\_\_\_\_

## Address Information

Date	Address	City	State	Zip	Phone

## Status

<input type="checkbox"/> Part-Time	<input type="checkbox"/> Regular	Hire Date _____	Wage \$ _____
<input type="checkbox"/> Full-Time	<input type="checkbox"/> Seasonal/Temp.	Position/Title _____	Per Hr. or Annually
<input type="checkbox"/> Part-Time	<input type="checkbox"/> Regular	Change Date _____	Wage \$ _____
<input type="checkbox"/> Full-Time	<input type="checkbox"/> Seasonal/Temp.	Position/Title _____	Per Hr. or Annually
<input type="checkbox"/> Part-Time	<input type="checkbox"/> Regular	Change Date _____	Wage \$ _____
<input type="checkbox"/> Full-Time	<input type="checkbox"/> Seasonal/Temp.	Position/Title _____	Per Hr. or Annually
<input type="checkbox"/> Part-Time	<input type="checkbox"/> Regular	Change Date _____	Wage \$ _____
<input type="checkbox"/> Full-Time	<input type="checkbox"/> Seasonal/Temp.	Position/Title _____	Per Hr. or Annually
<input type="checkbox"/> Part-Time	<input type="checkbox"/> Regular	Change Date _____	Wage \$ _____
<input type="checkbox"/> Full-Time	<input type="checkbox"/> Seasonal/Temp.	Position/Title _____	Per Hr. or Annually

## Personal Information

Social Security Number	# of Dependents	Gender	Date of Birth

## Emergency Contact

Name	Relationship	Address	Phone

## Separation Record

Separation Date	Terms