



NEW EMPLOYEE PAYROLL INFORMATION SHEET

Personal Information

Full Name _____
Last _____ *First* _____ *M.I.* _____

Address _____
Street Address _____ *Apartment Number/PO Box* _____

_____ *City* _____ *State* _____ *Zip* _____

Personal Email _____

Phone Number _____
Home _____ *Cell* _____

Date of Birth _____ Social Security # _____

Gender _____ Ethnicity _____

Taxing District in which you reside: _____
Township/Borough _____

Emergency Contact Information

Full Name _____
Last _____ *First* _____ *M.I.* _____

Phone Number _____
Home _____ *Cell* _____

Relationship to Employee _____

Employment and Retirement Information

Are you a current member of PSERS (Public School Employee's Retirement System)?
 Yes No

Are you presently receiving Retirement Benefits from PSERS (Public School Employees' Retirement System)?
 Yes No

****RETURN THIS FORM TO THE BUSINESS OFFICE IMMEDIATELY. THIS INFORMATION IS USED FOR YOUR PAYROLL/RETIREMENT PURPOSES****

INTERNAL USE ONLY

Job Title: _____ Employment Status: Full-time _____ Part-time _____