



# Visceral Solutions, Inc.

Providing Employer Administration Resources

## New Employee Information Sheet

### Employee Section

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Employee Name: \_\_\_\_\_ SSN: \_\_\_\_\_

Address: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

City & State: \_\_\_\_\_ County: \_\_\_\_\_ Zip: \_\_\_\_\_

Home Phone #: \_\_\_\_\_ Email: \_\_\_\_\_

Cell Phone #: \_\_\_\_\_

Emergency Contact: \_\_\_\_\_ Phone #: \_\_\_\_\_

Are you subject to wage garnishments, such as federal tax or child support garnishments?

Yes (please attach copies)       No

\* I understand that my employment is and will remain "at-will", meaning that my employment can be terminated by either myself or the company at any time, with or without notice and for any or no reason.

Employee Signature: \_\_\_\_\_ Date: \_\_\_\_\_

### Employer Section

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Date of Hire: \_\_\_\_\_

Company Name: \_\_\_\_\_ Location: \_\_\_\_\_

Position Title: \_\_\_\_\_  Exempt       Non Exempt

Salary \$ \_\_\_\_\_ per \_\_\_\_\_ Hourly Rate \$ \_\_\_\_\_ per hour

Full Time       Part Time       Temporary

#### Pay Types:

- Bonus
- Commission
- Tips (Cash or Paycheck)
- PTO/Vacation/Sick
- Holiday Pay
- Other: \_\_\_\_\_

#### Deductions: (if applicable)

- Medical: Pre Tax? Y or N per paycheck \$ \_\_\_\_\_
- Dental: Pre Tax? Y or N per paycheck \$ \_\_\_\_\_
- Vision: Pre Tax? Y or N per paycheck \$ \_\_\_\_\_
- 401k: Pre Tax? Y or N per paycheck \$ \_\_\_\_\_
- Other: Pre Tax? Y or N per paycheck \$ \_\_\_\_\_

Manager Name: \_\_\_\_\_

Date: \_\_\_\_\_

Manager Signature: \_\_\_\_\_