

# New Hire Form

PLEASE COMPLETE AND SEND ALONG WITH THE COMPLETED W-4, I-9, PCA SIGNATURE FORM AND DIRECT DEPOSIT APPLICATION.

PCA NAME: \_\_\_\_\_

PCA ADDRESS: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

PCA SOCIAL SECURITY NUMBER: \_\_\_\_\_

PCA DOB: \_\_\_\_\_

PCA HOME PHONE #: \_\_\_\_\_ PCA CELL PHONE #: \_\_\_\_\_

PCA EMAIL ADDRESS: \_\_\_\_\_

PLEASE MAKE SURE THE FOLLOWING REQUIRED FORMS ARE FULLY COMPLETED AND SIGNED:

W-4 (COMPLETED AND SIGNED BY PCA)  I-9 (COMPLETED AND SIGNED BY PCA AND CONSUMER)

IDs (PLEASE REVIEW THE LIST OF ACCEPTABLE DOCUMENTS ON PAGE 3 OF THE I-9)

PCA SIGNATURE FORM (COMPLETED AND SIGN BY PCA)

DIRECT DEPOSIT APPLICATION (COMPLETED AND SIGNED BY PCA WITH SUPPORTING DOCUMENTATION OF ACCOUNT ATTACHED)

EMPLOYER NUMBER:

EMPLOYER NAME: \_\_\_\_\_

EMPLOYER ADDRESS: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

EMPLOYER HOME PHONE #: \_\_\_\_\_ EMPLOYER CELL PHONE #: \_\_\_\_\_