



## NEW EMPLOYEE DATA SHEET

### *Employee Information (Please fill out this section only)*

First: \_\_\_\_\_ Middle: \_\_\_\_\_ Last: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

Birth Date: \_\_\_\_\_ Email: \_\_\_\_\_

Emergency Contact: \_\_\_\_\_ Relationship: \_\_\_\_\_

Telephone Number: \_\_\_\_\_ Alternate Number: \_\_\_\_\_

Emergency Contact: \_\_\_\_\_ Relationship: \_\_\_\_\_

Telephone Number: \_\_\_\_\_ Alternate Number: \_\_\_\_\_

### *Employer Information*

Hire Date: \_\_\_\_\_ Term Date: \_\_\_\_\_

Candidate Rep: \_\_\_\_\_ Status: \_\_\_\_\_

### *Assignments*

Company Name: _____	Pay Rate: _____
Start Date: _____	End Date: _____
Title: _____	
Company Name: _____	Pay Rate: _____
Start Date: _____	End Date: _____
Title: _____	
Company Name: _____	Pay Rate: _____
Start Date: _____	End Date: _____
Title: _____	