

Part-Time Employee Information Form

Please fill out the following information for your payroll file:

Name:

First

M.

Last

Mailing Address:

Same as physical address?

Yes

No

If physical address is different:

Primary Telephone Number:

(_____) _____ - _____

Social Security Number:

_____ - _____ - _____

Date of Birth:

____/____/____

Email Address:

Miscellaneous Info:

Our pay dates are bi-weekly; meaning that there are 26 pay dates in a calendar year.

You are a part time employee without benefits.

You will not be receiving a PERS retirement contribution as a part-time employee. The County will be contributing to Social Security since you won't receive any retirement benefit.

If you need to change your address, please contact the Comptroller's Office as soon as possible.

Your first check will be a paper check for the Prenote Authorization of Direct Deposit if you choose that option

By signing below, I understand that it is my responsibility to contact the Comptroller's Office if my address or personal contact information changes.

Employee Signature:

Date: