# MIDWEST SUBSTITUTE STAFFING, INC.

 3170 Old Farm Lane, Commerce Twp., Michigan 48390

 (248) 255-4630
 Fax (248) 313-2009

## **EMPLOYEE DATA RECORD**

Please complete this New Employee Data Record sheet. It will supply your employer with information needed for our payroll and benefits programs.

#### Please Complete and Print All Requested Information

Name:	
Social Security #:	
Present Address:	
Home Phone:	Cell Phone:
Email Address:	
Date of Hire:	
Occupation:	
In Case of Emergency Notify:	
Primary Contact Name:	
Phone # (Day):	
Phone # (Night):	
Address:	
Relationship:	
Alternate Contact Name:	
Phone # (Day):	
Phone # (Night):	
Address:	
Relationship:	

	3170 Old Fa	T SUBSTITU Irm Lane, Commen ) 255-4630 F		gan 48390	
Personal Data (fo	or the purpose	of EEO and Bene	efit Reporting	as may be req	uired):
Sex (Check One)	Male	🖵 Fer	male		
Have you ever work	ed for Midwe	st Substitute Stat	ffing, Inc.?	C Yes	D No
List any friends or re	elatives workir	ng at Midwest Su	bstitute Staff	ing, Inc.	
Voluntary Inforn	nation:				
Marital Status (Chee	ck One):	Married	□ Single	Divorced	
Name of Spouse:					
Names of Depender	nts:				
<b>Military</b> Are you a Veteran c	of the U.S. Arm	ed Forces? (Circ	le One):	Yes	🖵 No
If yes, which branch	:				
Are you entitled to Department of Vete		-			•
If yes, briefly explain	n:				
Do you have a milita schedules (Circle Or		-	_	-	our work
If yes, briefly explain	n:				
Cignoture of Emplo	vee				Date
Signature of Emplo	,				Date
Signature of Emplo	,				Date

Social Security Number: XXX-XX- Local Tax Jurisdiction: Resident Non Resident Return this form with enrollment paperwork to MidWest Substitute Staffing. You will be provided with the		
FOR NOTIFYING MIDWEST SUBSTITUTE STAFFING OF ANY LOCAL TAXES YOU ARE REQUIRED TO PAY (Such As City of Detroit, Pontiac or Lansing) Name: Social Security Number: XXX-XX- Local Tax Jurisdiction: Resident		3170 Old Farm Lane, Commerce Twp., Michigan 48390
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# MIDWEST SUBSTITUTE STAFFING, INC.

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February 14, 2019

Re: Condition of Employment – Direct Deposit

Dear Conditional New Hire:

Did you know...

- More than one million paychecks are lost or stolen each year?
- The Average person spends about 8 ½ hours a year waiting in lines to cash payroll checks.
- Direct Deposits always are paid on time, there is never a delay due to holiday, inclement weather or change of address issues.

With Direct Deposit, you will benefit in many ways. No more wasting part of your lunch hour or evenings waiting in lines at the bank or store. No possibility of losing or having your check stolen. No special trips or special arrangements when you are away from work on payday or are working off-hours. Direct Deposit means added convenience and security to you.

As a condition of employment with Midwest Substitute Staffing, it is required that all employees are to be enrolled in a Direct Deposit set-up. Attached is a Direct Deposit form if you have an active checking and/or savings account at a bank or credit union. If you currently do not have a banking institution, below are options for Direct Debit Cards (order online for no cost.)

- America Express Serve (<u>www.serve.com</u>)
- NetSpend (<u>www.netspend.com</u>)
- Visa Prepaid (<u>https://usa.visa.com/pay-with-visa/find-card/get-prepaid-card</u>)
- Wal-Mart Money Card (<u>www.walmartmoneycard.com</u>)
- Green Dot (<u>www.greendot.com</u>)

Again, you must be enrolled in Direct Deposit prior to your first payroll and supply a void check or direct deposit bank letter. Please contact your Account Manager with questions or concerns.

Most Sincerely, Midwest Substitute Staffing

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### **Direct Deposit Authorization Form**

Note: Attach a \*Void Check, Deposit Slip (savings only) or Bank Confirmation of Routing and Account Number Document to this form so that we may process a "pre-note" transaction. This will result in your first paycheck being "live" and the direct deposit will start with your second paycheck. *If you do not attach the \*requested information as listed above, we will conduct two (2) "pre-note" transactions and the first two (2) paychecks will be "live" and direct deposit will start with the third paycheck.* 

Employee Name (Please Pl	rint)		Effective Date	
XXX-XX-				
Social Security Number		Financial Institutio	n	
Worksite Name (Company	v Name)		Address	
			City, State, Zip	
Type of Account:				
Checking	Amount \$	or	Percentage	%
Savings	Amount \$	or	Percentage	%
Checking Account: <i>Please attach a Void Chec</i> Transit / Routing Number:	-	n of Routing	<b>9 Number and Accoun</b> Account Number:	t Number Documen
Saving Account: Please attach a Void Chec Transit / Routing Number:	-	n of Routin <u>c</u>	<b>g Number and Accoun</b> Account Number:	t Number Documen
I authorize my employer M account(s), specified above addition, I agree not to ho incomplete information su my financial institution in o have cancelled it in writing	e, each payday; adjustin ld my employer respons ipplied by me or by my depositing funds to my	ng entries to sible for any financial ins	correct errors are als delay or loss of funds titution or due to an e	o authorized. In due to incorrect or rror on the part of

**Employee Signature** 

Date

Note: Routing numbers and account numbers are required! Your request connate be processed without this info.