

SEASONAL EMPLOYEE CHECKLIST

Name: _____
Last
First

Last 4 Digits of Social Security _____
XXXX

Check mark the following:

	Yes	No
*Direct Deposit Banking Details the same Check box If answer <u>No</u> you do not wish to sign up at this time <input type="checkbox"/> Check box If you would like to sign up <input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
*W-4 Federal Tax the same	<input type="checkbox"/>	<input type="checkbox"/>
*New York State Withholding the same	<input type="checkbox"/>	<input type="checkbox"/>
Telephone Number the same`	<input type="checkbox"/>	<input type="checkbox"/>
New Telephone Number () _____	<input type="checkbox"/>	<input type="checkbox"/>
Email Address the Same	<input type="checkbox"/>	<input type="checkbox"/>
New Email: _____	<input type="checkbox"/>	<input type="checkbox"/>
Mailing Address the same	<input type="checkbox"/>	<input type="checkbox"/>
New Address: _____	<input type="checkbox"/>	<input type="checkbox"/>
Are you currently a Student? If yes, where? _____ (If not applicable skip this question)	<input type="checkbox"/>	<input type="checkbox"/>

Signature

Date

*If you answer No to any one of these questions, please see Personnel immediately to complete new forms to make necessary changes. If no longer a Student and work at the Golf Course see personnel immediately.