JSA
Accounting Solutions, LLC

Payroll Enrollment Form

New Hire Information		
First Name:		MI:
Last Name:		
Address:		
City:	State:	Zip:
Social Security Number:		Date of Birth:
Date of Hire:		
Email:		
Phone Number:		

Tax Withholding		
Federal Filing Status (Check One):		
☐ Single	☐ Married	☐ Head of Household
Additional Federal Withholdings:		
☐ None		☐ Dollar Amount:
State Filing Status (Check One):		
☐ Same as Federal		
☐ Single	☐ Married	☐ Head of Household
Additional State Withholdings:		
☐ None		☐ Dollar Amount:

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Direct Deposit Information	
Bank Name:	Bank Name:
Routing Number:	Routing Number:
Account Number:	Account Number:
Type of Account (Check One): ☐ Checking ☐ Savings	Type of Account (Check One): ☐ Checking ☐ Savings
Deposit Amount (Check One): ☐ Full Amount ☐ Partial $: ☐ Partial %:	Deposit Amount (Check One): ☐ Remainder: ☐ Partial $: ☐ Partial %:

To Be Completed By Employer
Worker Status: ☐ W-2 (Employee) ☐ 1099 (Contractor)
Complete Only if W-2: ☐ Part-Time ☐ Full-Time
Pay Rate: ☐ Salary: ☐ Hourly: ☐ Commission (if applicable)