

**Small Business  
Professional Services, LLC**  
*\*Professional \*Personal \*Reliable*

**EMPLOYEE PROFILE**

Company Name: \_\_\_\_\_

Employee Name: \_\_\_\_\_ SS# \_\_\_\_\_

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

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

County: \_\_\_\_\_ School District: \_\_\_\_\_ Phone: \_\_\_\_\_

Sex: \_\_\_ Birthday: \_\_\_/\_\_\_/\_\_\_

Email address: \_\_\_\_\_

Start date: \_\_\_/\_\_\_/\_\_\_

Status: W2 / 1099

Dept: \_\_\_\_\_

Direct Deposit:

***Voided check and/or authorization letter from bank must be attached***

Please check all that apply and list amount:

Salary \_\_\_\$\_\_\_\_\_ Annual / Other \_\_\_\_\_

Hourly 1 \_\_\_\$\_\_\_\_\_

Hourly 2 \_\_\_\$\_\_\_\_\_

OT \_\_\_\$\_\_\_\_\_

Federal:

State:

Filing Status: \_\_\_\_\_

Exemptions: \_\_\_\_\_

Add'l W/H: \_\_\_\_\_

*Please check if a New Hire report is required*

**Special Instructions:** (i.e. Garnishments, SD & Local Tax)

SD# \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

*To be completed by SBPS, LLC:*

**Reported as New Hire**

Date: \_\_\_\_\_

Initial: \_\_\_\_\_