

WILLIAMS UNIFIED SCHOOL DISTRICT
PO BOX 7
WILLIAMS, CA 95987
530-473-2550

PAYROLL / PERSONNEL DATA SHEET

Social Security # _____ - _____ - _____

Date: _____

Last Name

First Name

M.I.

Ethnicity: (Select only one) _____ No, Not Hispanic or Latino _____ Yes, Hispanic or Latino

Race: (Mark one or more as appropriate to indicate what you consider your race to be)

____ American Indian or Alaskan Native

____ Laotian

____ Samoan

____ Chinese

____ Cambodian

____ Tahitian

____ Japanese

____ Hmong

____ Other Pacific Islander

____ Korean

____ Other Asian

____ Filipino

____ Vietnamese

____ Hawaiian

____ Black or African American

____ Asian Indian

____ Guamanian

____ White

Mailing Address: _____
City State Zip

Physical Address: _____
City State Zip

Home Phone () _____ Cell Phone () _____

Emergency Contact _____
Name Relationship Phone number

Birthdate _____ Hire Date _____

T.B. Exp. Date _____

I wish to have my pay split into _____ months. (10 month employees may have the option of receiving their monthly pay split over a period of 12 months instead of 11 months.)

Have you ever been on a Retirement System?

____ Yes _____ STRS _____ PERS _____ Other

____ No _____ Refunded _____ Retired

CHECK LIST --- OFFICE USE ONLY

FINGERPRINTS COMPLETED _____

T.B. SKIN TEST VERIFICATION _____

NEED COPY OF CREDENTIAL _____

FORM I-9 COMPLETED _____

FORM W-4 TAX COMPLETED _____

SIGNED CHILD ABUSE FORM _____