NON-UNION START FORM

NEW EMPLOYEE



RE-HIRE			1210 W Burbank E	Blvd Burbank CA 9	91506 (818) 562-7866
PRODUCTION COMPANY		PICTURE/PROJECT			START DATE
EMPLOYEE NAME		SOCIAL SECURITY NUMBER		BIRTH DATE	SEX F
EMPLOYEE ADDRESS		CITY		STATE	ZIP
EMAIL	PHONE		JOB TITLE		
WORK CITY/STATE(S)					
CITIZENSHIP US CITIZEN RESIDENT ALIEN OTHER		ETHNICITY (OPTIONAL) WHITE/CAUCASIAN ASIAN AFRICAN-AMERICAN AMERICAN INDIAN HISPANIC OTHER			
LOANOUT USE ONLY		PRODUCTION COMPANY USE ONLY			
COMPANY NAME		ACA EMP. STATUS	FULL TIME PA	RT TIME VARIAE	BLE SEASONAL
FEIN/TIN		RATE TYPE	HOURLY (NON-EXEMPT)	DAILY	WEEKLY
REGISTERED TO DO BUSINESS IF NO, WHICH STATE? IN ABOVE WORK STATE?		JOB TITLE			
SIGNATURES		ACCOUNT CODE			
By signing this form, I certify that all information entered is correct. I also agree that the employer may take deductions from my earnings to adjust previous overpayments if and when they may occur.		RATE PER HOUR/DAY/WEEK			
		GUARANTEED HOURS PER DAY/WEEK			
EMPLOYEE SIGNATURE AUTHORIZED SIGNA	ΓURE	BOX RENTAL			
x		CAR RENTAL			