



RETURNING EMPLOYEE PAPERWORK CHECKLIST

Employee Name: _____

FORM	REQUIREMENT	COMPLETE
Personnel Action Form "PAF"	<i>Section 1 & 3 Signature & Date</i>	<input type="checkbox"/>
Automatic Deposit Form (if bank info has changed since last time)	<i>Information + Signature & Date</i>	<input type="checkbox"/> <input type="checkbox"/>
SEE ABOVE Void check <u>or</u> Savings Deposit Slip <u>or</u> Printout from Bank	<i>Attached to Deposit Form</i>	<input type="checkbox"/>
W-4 Form for current year "Withholding Tax"	<i>Lines 1-6 or Lines 1-4 & 7 Signature & Date</i>	<input type="checkbox"/>
Parent Authorization Form (if under 18)	<i>Information + Parent Signature Your Signature & Date</i>	<input type="checkbox"/> <input type="checkbox"/>
Background check authorization (if turned 18 since last employment)	<i>Information + Signature & Date</i>	<input type="checkbox"/>