

## START FORM

☐ new employee     
 ☐ re-hire     
 ☐ Change

Producing Co	Picture Title				Account coding	
EMPLOYEE NAME	Social security number				union	Occ code
Employee Address	City	State	Zip	Sex M   F		Telephone
Ethic code <div style="border: 1px solid black; width: 50px; height: 20px; display: inline-block;"></div> 1 = White   2 = Black   3=Hispanic   4=Asian   5=Native Amer   6=Other						Email address
Citizen Status  <input type="checkbox"/> us <input type="checkbox"/> Resauen <input type="checkbox"/> Other (Must have visa attached)						Canadian individual tax number
NOTE: This statement must be filled out prior to payment being made. UNDER THE PENALTIES OF PERJURY , I CERTIFY THAT I AM A RESIDENT OF THE STATE OF <div style="border: 1px solid black; width: 450px; height: 25px; display: inline-block;"></div>						Work State/City/Country
Minor is employee a minor? <input type="checkbox"/> Yes <input type="checkbox"/> No		Payment authorization attached ? <input type="checkbox"/> Yes <input type="checkbox"/> No				Start Date
Terms of employment      do not use shaded areas – for office use only						
Hourly Employee	Studio Rate	Quar Hours	Location Rate	Quar hours	Pay Scale	
Hourly Rate						
6TH DAY						
7TH DAY						