New Employee Information	
First Name	AbdulRehman
Middle Name	Mirza
Gender	Male
Date Of Birth	2021-03-17
Social Security #	12345678
Complete Address	Lahsoe
Maritial Status	None
Number of Dependants Under 17	None

Keep below documents for your records

None

Yes

Number of Dependants Over 17

Do you want direct deposit if yes then need copy of voided check

Form I-9	completed and signed
Form W-4	completed and signed
Copy of Driver License	clear readable copy
Copy of social security card	clear readable copy
Copy of his/her immigration status document	clear readable copy