NON-UNION START FORM



NEW EMPLOYEE				Blvd Burbank CA 9	91506 (818) 562-7866
RE-HIRE					,
PRODUCTION COMPANY		PICTURE/PROJECT			START DATE
EMPLOYEE NAME		SOCIAL SECURITY NUMBER		BIRTH DATE	SEX F
EMPLOYEE ADDRESS		CITY		STATE	ZIP
EMAIL PH	HONE		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 CO	MPANY USE ONLY	(
LOAN OUT USE ON LY COMPANY NAME		ACA EMP. STATUS		MPANY USE ONLY	
		ACA EMP. STATUS			BLE SEASONAL
COMPANY NAME FEIN/TIN	NO, WHICH STATE?		FULL TIME P.	ART TIME VARIA	BLE SEASONAL
COMPANY NAME FEIN/TIN REGISTERED TO DO BUSINESS YES NO	NO, WHICH STATE?	RATE TYPE	FULL TIME P.	ART TIME VARIA	BLE SEASONAL
COMPANY NAME FEIN/TIN REGISTERED TO DO BUSINESS YES NO	ne employer	RATE TYPE JOB TITLE	FULL TIME P.	ART TIME VARIA	BLE SEASONAL
COMPANY NAME FEIN/TIN REGISTERED TO DO BUSINESS YES NO SIGNATURES By signing this form, I certify that all information entered is correct. I also agree that the	ne employer	RATE TYPE JOB TITLE ACCOUNT CODE RATE PER	FULL TIME P.	ART TIME VARIA	BLE SEASONAL
COMPANY NAME FEIN/TIN REGISTERED TO DO BUSINESS YES NO SIGNATURES By signing this form, I certify that all information entered is correct. I also agree that the	ne employer they may occur.	RATE TYPE JOB TITLE ACCOUNT CODE RATE PER HOUR/DAY/WEEK GUARANTEED HOURS	FULL TIME P.	ART TIME VARIA	BLE SEASONAL