

Church Name _____

Ordained Employee Information Sheet

New Hire, Change, Re-hire

Social Security Number _____ Employee # _____

Name: Last _____ First: _____ MI _____

Address: _____

City: _____ State: _____ ZIP: _____

Telephone #: _____ Birth Date: ____/____/____ Gender: _____

Department: _____

Hire Date: ____/____/____ Re-hire Date: ____/____/____ Term Date: ____/____/____

Pay Rate Information

Only use this employee information sheet if you are **ordained.**

Pay Frequency: Weekly, Bi-Weekly, Semi-Monthly, Monthly

Clergy Earnings: \$ _____	per Pay Period	First Pay Amount if Prorated: \$ _____
Housing Allowance: \$ _____	per Pay Period	First Pay Amount if Prorated: \$ _____
Auto Allowance: \$ _____	per Pay Period	First Pay Amount if Prorated: \$ _____
_____ Allowance: \$ _____	per Pay Period	First Pay Amount if Prorated: \$ _____

Tax Information

It is a minister's choice whether Federal Withholding Taxes are deducted or not.

W-4 Filing Status: Single, Married, Married w/h at Single Rate; Number of Allowances _____
Or

None Flat Amount/Percent (\$, %) _____ Additional Amount/Percent (\$, %) _____

State Filing Status: Single, Married, Married w/h at Single Rate; Number of Allowances _____
Or

None Flat Amount/Percent (\$, %) _____ Additional Amount/Percent (\$, %) _____

Deduction Information

Deduction _____ Amount _____ per _____

Deduction _____ Amount _____ per _____