

Paragon Business Services, Inc.

New Employee Form Hire Date: / / New Hire Re-Hire Change

Last Name: _____

First Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Social Security Number: _____ - _____ - _____ Gender: M / F

Marital Status: _____ Exemptions Claimed: _____

Department: _____ Hours this payroll: _____ Overtime: _____

Rate of pay: _____ Tips this payroll: _____ Training: _____

Special Instructions: _____

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