

Work Experience/ Transitional Job Payroll Information

New Enrollee

Change/Update Information

Remove from NIS

Training Program: Work Experience OR Transitional Job

Personal Information

Last Name _____ First Name _____

Date of Birth (mm/dd/yyyy) ____/____/____

Social Security Number _____

Address _____

City _____ State _____ Zip Code _____

Tax Filing Status: Single Married

Exemptions/Deductions (Line 5 from W-4 Form): _____

NWD Information

Career Center _____

Effective Date (mm/dd/yyyy) ____/____/____

Salary \$ _____ /hour

Cost Center _____

Account Number: Adult

In-School Youth

Out-of-School

DLW

Method of Payment: Payroll Card OR Direct Deposit to Bank Account

Career Planner (Print Name)

Career Planner Signature

Date

Remove from NIS: De-obligation Amount: _____ N/A