

Oklahoma New Hire Reporting Form

OES112(12-04)

Please fill out completely and mail to: Oklahoma New Hire Reporting Center
(PRINT or TYPE Please!) PO Box 52003
Oklahoma City OK 73152-2003
OR FAX to: 1-800-317-3786 or OKC Metro Area (405) 557-5350

Download a copy of this form at:
<http://www.oesc.state.ok.us/newhire/>

Information Number: 1-800-317-3785 or OKC Metro Area (405) 557-7133

Employer Information

Federal Employer Identification Number

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Company Name

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Payroll Processing Address Line 1

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Payroll Processing Address Line 2

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Payroll Processing Address Line 3

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Oklahoma Account Number

		-												
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Payroll Processing Area Code, Phone Number

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Extension

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City

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State

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Country

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ZIP Code

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New or Rehired Employee Information

Social Security Number

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First Name Middle Last Name

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Mailing Address

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City

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State

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ZIP Code

						-								
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Date of Birth

Month

--	--

Day

--	--

Year

--	--

Occupation

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Starting Salary

\$

--

Hour
Month

Week
Year

Commission / Other

New Hire

Recalled

State of Hire

--	--

Date Started to Work or Recalled

Month

--	--

Day

--	--

Year

--	--

Dependent health insurance available?

Yes

No

Is this person currently employed with your company?

Yes

No