

COMMUNITY/LAY COACHES REPORTING FORM FOR PAYROLL

NOTE: THIS FORM IS REQUIRED ONLY FOR PAID COMMUNITY COACHES.



TYPE OR PRINT INFORMATION

NEW COACH: _____ EXISTING COACH: _____

SCHOOL: _____

LAST NAME: _____ FIRST NAME: _____ MI: _____

SOCIAL SECURITY or EMPLOYEE # _____

ADDRESS: _____

EMAIL ADDRESS: _____

CELL NUMBER: _____

WORK TELEPHONE NUMBER: _____

RACE: _____ SEX: _____ DOB: _____

DATES WORKED: _____ to _____ RATE OF PAY: _____

HUMAN RESOURCES ONLY

___ GCIC CLEARED
___ FINGER PRINTS CLEARED
___ I-9 FORM (2 FORMS OF ID)
___ TAX FORMS (W-4, G-4)
___ DIRECT DEPOSIT (VOIDED CHECK)
___ EMPLOYEE NUMBER

HR ASSOCIATE

DATE

COACH SIGNATURE / DATE

PRINCIPAL/DEPARTMENT HEAD SIGNATURE / DATE

HUMAN RESOURCES COORDINATOR / OR DESIGNEE