



ATTENTION: this form contains confidential information and should not be submitted via email. Please use more secure options, such as, our [Online Portal](#), Fax or drop off in person at the [nearest location](#).

# NEW EMPLOYEE INFORMATION FORM

## TO BE COMPLETED BY EMPLOYER

New Hire

Re - Hire

Update to information

**Start Date:** \_\_\_\_\_ **Salary/Wage: \$** \_\_\_\_\_ **per** \_\_\_\_\_ (ex: hour, month, year, etc.)  
(yyyy/mm/dd)

**Payroll frequency:** bi-weekly    monthly    semi-monthly    other:

**Employment Status:** Permanent    Temporary /    Full-Time    Part-Time

**Is the employee related to a shareholder?**    Yes    No

**If YES, how?**    child    sibling    parent    other:

**Vacation rate:** \_\_\_\_\_ (Per labor standards, minimum is 4%, after 5 years of service increase to 6%)

Accrued    Include in each pay

**Employer Name:**

**Employer Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

Print this form once completed, sign and return to us using a secure method. **NOT EMAIL.**

## TO BE COMPLETED BY EMPLOYEE

**First Name:**

**Last Name:**

**Birth Date:**

(yyyy/mm/dd)

**Social Insurance Number (SIN):**

**Personal Email (for paystubs):**

**Mailing Address:**

**Home Phone #:**

**Cell Phone #:**

(indicate preferred with checkbox)

**Employee Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

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**Attach** bank information (**void cheque**) for direct deposit & **completed** the **Federal Personal Credits Return Form (TD1) & Manitoba Personal Credits Return Form (TD1MB)**. Links on our [website](#) (Free Ressources Page)

*Trade your tax stress for true peace of mind*

