

STEP-BY-STEP INSTRUCTIONS

EMPLOYEE PACKET

1. Employee Information Form

- ◆ This is a 1 page form
 - Fill in all lines of this form with the information requested.
 - Make a copy of the form for your files.

2. IRS Form W-4

- ◆ This is a 1 page form with 1 additional page of support material
 - Employee enters all information requested in sections 1-7.
 - Employee signs and dates form.
 - Enter ONLY the name of the employer (consumer) in section 8.
 - Leave sections 9 and 10 blank.
 - Make a copy of the form for your files.

3. DHS Form I-9

- ◆ This is a 1 page form with 3 additional pages of support material
 - Employee completes all areas of Sections 1.
 - Employee **MUST** check one of the three boxes in the lower right area of Section 1.
 - Employee signs and dates Sections 1.
 - The "Preparer and/or Translator Certification" section is to be completed only if applicable.
 - Consumer or consumer's CDC+ representative completes Section 2.
 - If the document you reviewed came from List A, you only need to enter that document in the List A section and leave the rest of this area blank.
 - If the document you reviewed did not come from List A, you must examine a document from List B and a document from List C, and enter both those document titles, numbers, expiration dates, etc., in the List B section and in the List C section, respectively.
 - In the "Certification" area, enter the month/day/year that the employee started working for you or will start working for you.
 - Complete the signature blocks. If consumer's CDC+ representative is signing, sign as: "Representative Name for Consumer Name."
 - Print the Consumer's Name in the Print Name block. If the consumer's CDC+ representative signed in the signature block, print "Representative Name for Consumer Name."
 - In the Title block, Household Employer has been entered for you.
 - In the Business or Organization Name and Address, print the consumer's name and address.
 - Enter the date signed by the consumer or representative.
 - Leave Section 3 blank.
 - Make a copy of the form for your files.

- Please note that if your employee has a name change, or if you re-hire this employee, you must make a copy of the original form that was completed for the employee and complete Section 3 to identify the changes that are required in Section 3, as applicable.

4. Direct Deposit Form (EFT)

- ◆ This is a 1 page form
 - Follow the instructions that are printed on the form
 - Make a copy of the form for your files.

Put the above original documents together in the order shown and submit to the Agency for Persons with Disabilities. For the current purpose of enrolling with APD as the Fiscal/Employer Agent, these documents (or copies of the same documents you sent to PPL) are to be attached to the Employee List and returned to APD in the envelope provided.