

# ASI

## Pension Administration

### 401(K) NEW HIRE FORM

This form should be completed on every new employee regardless of age or whether they hold a part time or full time position.

COMPANY NAME: \_\_\_\_\_

EMPLOYEE NAME: \_\_\_\_\_

SOCIAL SECURITY # \_\_\_\_\_

ADDRESS: \_\_\_\_\_

\_\_\_\_\_

DATE OF BIRTH: \_\_\_\_\_

DATE OF HIRE: \_\_\_\_\_

HOURLY RATE: \_\_\_\_\_

OR

SALARY RATE: \_\_\_\_\_

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