Oklahoma New Hire Reporting Form

OES112(03-08)

Please fill out completely and mail to: (PRINT or TYPE Please!)
Oklahoma New Hire Reporting Center
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: www.ok.gov/oesc/index.php?c=11

OKDHS - Oklahoma Employer Services Center Information Number:
1-866-553-2368 or OKC Metro Area (405) 522-5550

Employer Information

Federal Employer Identification Number
[ ][ ]-[ ][ ][ ][ ][ ][ ][ ]

Oklahoma Account Number
[ ][ ]-[ ][ ][ ][ ][ ][ ][ ][ ]

Company Name

Payroll Processing Area Code, Phone Number

Extension

Payroll Processing Address Line 1

City

State

Payroll Processing Address Line 2

Country

Payroll Processing Address Line 3

ZIP Code

New or Rehired Employee Information

Social Security Number
[ ][ ][ ] – [ ][ ] – [ ][ ][ ][ ]

Occupation

First Name Middle Last Name

Starting Salary
$

Hour Week Commission / Other
Month Year

Mailing Address

New Hire Recalled

State of Hire [ ][ ]

City

Date Started to Work or Recalled
Month [ ][ ] Day [ ][ ] Year [ ][ ]

State [ ][ ]

ZIP Code [ ][ ][ ][ ][ ]-[ ][ ][ ][ ]

Dependent health insurance available?
Yes No

Date of Birth
Month [ ][ ] Day [ ][ ] Year [ ][ ]

Is this person currently employed with your company?
Yes No