



Employee Packet Instructions

MDS Resources, LLC

These instructions should be given to each employee to help him/her complete all the documents in the Employee Packet. Some of the forms have additional instructions contained within the form publication (ie. W-4, A-4, I-9). The Employee Packet should be printed along with a copy of these instructions so the employee and work-site manager can fill in the blanks and complete all the necessary documentation together.

Employee Information Form

Each employee should complete the Employee Information Form. Some information may need to be completed by the work-site management regarding Position and Compensation. **Both** the employee and the work-site manager should sign and date the form.

Employee Withholding Allowance Certificate (W-4)

Each employee should complete a W-4 so that the correct amount of taxes is withheld from their paycheck. Please complete items 1-7 plus the employee signature and date.

Arizona Withholding Percentage Election (A-4)

Each Arizona employee should complete a A-4 form so that the correct amount of Arizona taxes is withheld from their paycheck. The employee should sign and date the A-4 form.

Employment Eligibility Verification (I-9)

The purpose of this form is to document that each employee (both citizen and non-citizen) hired after November 6, 1986, is eligible to work in the United States. The employee should complete the first section. If necessary, the Preparer/Translator section must be completed. The manager must complete the remainder of the form in presence of employee and his/her valid identification. Make sure to fill out the information contained in the certification section. The "Business or Organization Name and Address" is your name and the address of your business, not MDS Resources. This is the most important form in the packet and please be sure to contact us if you have any questions. These must be **completely** and **accurately** filled out to be accepted.

Substance Abuse Policy Acknowledgement

The employee should read and understand that MDS Resources, LLC has a substance abuse policy. The employee should sign and date this form acknowledging receipt of this notification.

Direct Deposit Enrollment Form

If the employee elects to participate in electronic direct deposit, please complete the form and sign/date.