



BIRMINGHAM
 CITY SCHOOLS
 BUILDING LEADERS. IMPACTING THE WORLD.

PAYROLL DEPARTMENT REQUEST FORM

NAME: _____

EMPLOYEE#: _____

SOCIAL SECURITY #: _____ - _____ - _____ SCHOOL/

DEPT: _____

CONTACT NUMBER (S): _____ OR _____

EMAIL

ADDRESS: _____

W-2: (YEARS)
(MONTHS)

CHECK STUB:

***COMMENTS:**



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SIGNATURE: _____ DATE: _____

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