KANSAS DEPARTMENT OF LABOR www.dol.ks.gov

NEW HIRE REPORT

K-CNS 436 (9-15)

K.S.A. 75-5743 and the Personal Responsibility and Work Opportunity Reconciliation Act of 1996, 42 U.S.C. 653A, requires all employers to report newly hired and re-hired employees to a state directory within 20 days of their hire date.

This form can be completed, printed to be mailed or faxed to the Kansas New Hire Directory at the address and fax shown below.

EMPLOYER INFORMATION Federal Employer ID Number (FEIN) – use the same FEIN as that listed on employer's quarterly wage report: Employer name: Employer address (use address where Income Withholding Orders should be sent):	
City:	State: ZIP:
Employer phone:	
Employer fax:	
Contact name:	
Email contact:	
EMPLOYEE INFORMATION	
Employee Social Security Number (SSN):	
First name: MI: _	Last name:
Employee home address:	
City:	State: ZIP:
Date of hire (MM/DD/YYYY):	