

The Adjutant General's Department

Employee Data Information

This information is needed for personnel and payroll records. It is the responsibility of the employee to complete this form and update information within ten (10) days of a change.

 Name Other Names (last, nicknames, etc) Effective Date

 Home Address City State Zip Code County

 Home Phone Birth Date Social Security Number Employee ID #

1. _____
 Emergency Contact Relationship Work Phone Home Phone

 Home Address City State Zip Code County

2. _____
 Emergency Contact Relationship Work Phone Home Phone

 Home Address City State Zip Code County

Nepotism: *List name and relationship of any relatives employed by the Adjutant General's Department. (KAR 1-9-21). Continue on back if needed.*

Name	Relationship	Worksite
_____	_____	_____
_____	_____	_____
_____	_____	_____

State Employment: List all previous state employment. Continue on back if needed.

Dates	Agency
_____	_____
_____	_____
_____	_____

Worksite Information:

Location: _____ **Work #:** _____ **(DSN)** _____

E-Mail: _____ **Fax #:** _____

Supervisor: _____ **Work#:** _____ **(DSN)** _____

OSHR: _____ **SHaRP** _____ **Database** _____

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Brigadier General Lee E. Tafanelli
The Adjutant General and Director of
Emergency Management & Homeland Security

Adjutant General's Department

Sam Brownback, Governor

State of Kansas Employee's Oath

K.S.A. 75-4308 et seq requires that the following oath from K.S.A. 54-106, be signed by new employees before entering the duties of employment and before funds for service may be disbursed:

I do solemnly swear (or affirm) that I will support the constitution of the United States and the constitution of the State of Kansas, and faithfully discharge the duties of my office of employment. So help me God.

Employee's Signature

Date

SUBSCRIBED AND SWORN TO before me

this _____ day of _____, _____.

My commission expires _____, _____.

Notary Public

State Information Technology Policy

Notice and Consent

Use of this Government Computer System constitutes consent to monitoring of the system. Please use this technology responsibly. The contents and communications of this information system, including electronic mail (E-mail) and Internet access, may be monitored for inappropriate use. Inappropriate use may result in disciplinary action up to and including termination of employment.

Purchase and Acquisition

The Director of Information Management (DOIM) will review all purchases and acquisition of computer equipment and peripherals for this agency, in order to meet user and network requirements. All offices must coordinate with DOIM through their supervisory chain for purchase of computer systems or software and use of personal software (e.g., use of AOL on a government laptop). Violation of this policy may result in disciplinary actions.

Computer Use Policy

- Government provided hardware and software are for conducting official government business. Supervisors may authorize personnel to use government resources to further professional and technical knowledge if it is determined to be in the best interest of the agency.
- You are accountable and responsible for any transmission you generate, forward, copy, or distribute.
- Electronic communications are not confidential.
- Use of electronic communication (E-mail and Internet) are subject to official agency monitoring, and misuse may result in disciplinary action or criminal prosecution.
- The following activities involving the use of government computer hardware/software or network systems are specifically prohibited:
 - Storing, processing, displaying, sending, or transmitting language or material that is derogatory, discriminatory or offensive (e.g. hate or racist literature or symbols), obscene (pornography or sexually explicit), or sexually harassing material.
 - Storing or processing copyrighted material (including cartoons) unless approved by the author or publisher.
 - Activities for personal or commercial financial gain (e.g. sale of commercial or personal property).
 - Participating in "Chat Lines" or open forum discussion
 - Using another person's account or identity
 - Viewing, changing, damaging, deleting, or blocking access to another user's files or communications without appropriate authorization or permission.
 - Attempting to circumvent or defeat security or auditing systems without prior authorization or permission (such as for legitimate system testing or security research).
 - Installing, copying, storing, or using unauthorized software.
 - Permitting any unauthorized individual access to a government owned or operated system.
 - Modifying or altering the network operating system or system configuration without first obtaining permission from the administrator of that system.
 - Simultaneously being connected to the local area network AND a dial-up Internet service provider (e.g. AOL). This opens the system to outside intrusion.
 - Processing of classified information on any system not approved for classified information.
 - Connection of any non-agency owned equipment with out the written permission of the DOIM.
- Prior to an individual being granted access to a government network, they will sign a statement acknowledging they have reviewed and understand the provisions of this policy. Each individual's immediate supervisor is responsible to ensure that this occurs prior to system access.

I have read and understand this policy. I understand all information, including personal information, placed on or sent over this system may be monitored.

Signature

Date

**AUTHORIZATION FOR DIRECT DEPOSIT OF EMPLOYEE PAY
 AND/OR EMPLOYEE TRAVEL**
 (Please print or type all information)

EMPLOYEE INFORMATION

DEPARTMENT ID	EMPLOYEE ID	NAME (Last, First, MI)

SECTION A: ENROLLMENT OR CHANGE AUTHORIZATION

(Complete this section for new enrollments, financial institution or account changes.) An employee may select up to a maximum of one account for SMART and a maximum of nine accounts for SHARP. The employee should complete additional pages of the authorization form as needed. If the direct deposit may result in the transfer of funds to a financial agency outside the U.S., the 'International ACH Bank' checkbox should be turned 'on'.

CHECK IF ADDITIONAL PAGES ARE ATTACHED

SELECT ONE: New Enrollment Account Change EFFECTIVE DATE

SELECT ONE OR BOTH SHARP SMART Travel and Expense (mark ONLY one account in the Use for SMART box)

FINANCIAL INSTITUTION INFORMATION

NAME	
CITY	

BRANCH	
STATE	
	ZIP

ACCOUNT DISTRIBUTION DATA:

PRIORITY #		<input type="radio"/> BALANCE
TRANSIT #		
ACCOUNT #		
% NET PAY/AMOUNT*		

<input type="radio"/> Checking	<input type="checkbox"/> International ACH Bank
<input type="radio"/> Savings	<input type="checkbox"/> Use for SMART
<input type="checkbox"/> Cancel for SMART	<input type="checkbox"/> Cancel for SHARP

FINANCIAL INSTITUTION INFORMATION

NAME	
CITY	

BRANCH	
STATE	
	ZIP

ACCOUNT DISTRIBUTION DATA:

PRIORITY #		<input type="radio"/> BALANCE
TRANSIT #		
ACCOUNT #		
% NET PAY/AMOUNT*		

<input type="radio"/> Checking	<input type="checkbox"/> International ACH Bank
<input type="radio"/> Savings	<input type="checkbox"/> Use for SMART
<input type="checkbox"/> Cancel for SMART	<input type="checkbox"/> Cancel for SHARP

I authorize the State of Kansas to initiate accounting transactions to deposit my employee pay and/or travel related payment directly to the account(s) indicated above and to correct any errors which may occur from these transactions. I also authorize the Financial Institution to post these transactions to these accounts. This authorization is to remain in force until the State of Kansas receives written notice from me to cancel or change this authorization.

* SHARP only

_____ EMPLOYEE SIGNATURE

_____ DATE

SECTION B: CANCELLATION

(Complete this section to cancel the Direct Deposit Authorization)
 (See your payroll section for Skycard information)

EFFECTIVE DATE	
----------------	--

I hereby cancel the authorization for the State of Kansas to originate direct deposit entries to my checking/savings account(s).

_____ EMPLOYEE SIGNATURE

_____ DATE

K-4

(9/07)

KANSAS

EMPLOYEE'S WITHHOLDING ALLOWANCE CERTIFICATE

The following instructions will assist you in completing the worksheet and K-4 form below. After you have completed the K-4 form, detach it and give it to your employer. For assistance with this form, call KDOR (Kansas Department of Revenue) at 785-368-8222.

Purpose of the K-4 form: A completed withholding allowance certificate will let your employer know how much Kansas income tax should be withheld from your pay on income you earn from Kansas sources. Because your tax situation may change, you may want to refigure your withholding each year.

Exemption from withholding: To qualify for exempt status you must, 1) Verify with KDOR that last year you had the right to a refund of all STATE income tax withheld because you

had no tax liability; 2) Verify with KDOR that this year you will receive a full refund of all STATE income tax withheld because you will have no tax liability.

Notes: Your status of "Single" or "Joint" may differ from your status claimed on your Federal Form W-4. Claiming more than the proper amount may result in taxes owed when filing your state income tax.

Basic Instructions: If you are not exempt, complete the **Personal Allowances Worksheet** below. The allowances claimed on this form should not exceed that claimed under "Exemptions" on your Kansas income tax return. To avoid owing taxes when you file, follow the suggested allowance rate selection on line A below. This form must be

filed with your employer; otherwise, your employer must withhold Kansas income tax from your wages without exemption at the "Single" allowance rate.

Head of household: Generally, you may claim head of household filing status on your tax return only if you are **unmarried and pay more than 50% of the cost of keeping up a home for yourself and for your dependent(s).**

Nonwage income: If you have a large amount of nonwage Kansas source income, such as interest or dividends, consider making estimated tax payment using form K-40ES, Estimated Tax for Individuals. Otherwise, you may owe additional tax when filing your state income tax return.

Personal Allowance Worksheet (Keep for your records)

A Allowance Rate:

If you are a single filer mark "Single"

If you are married and your spouse has income mark "Single"

If you are married and your spouse does not work mark "Joint"



Single

Joint

B Enter "0" or "1" if you are married or single and no one else can claim you as a dependent (entering "0" may help you avoid having too little tax withheld) **B** _____

C Enter "0" or "1" if you are married and only have one job, and your spouse does not work (entering "0" may help you avoid having too little tax withheld) **C** _____

D Enter "1" if you will file head of household on your tax return (see conditions under "Head of household" above) **D** _____

E Enter the number of dependents you will claim on your tax return. Do not claim yourself or your spouse or dependents that your spouse has already claimed on their form K-4. **E** _____

F Enter "1" if you have at least \$1,500 of child or dependant care expenses for which you plan to claim a credit and your household income is below \$50,000 **F** _____

G Add lines B through F and enter the total here **G** _____

▼ Cut here and give this K-4 form to your employer. (Keep the top portion for your records.)

K-4

(9/07)

Kansas Employee's Withholding Allowance Certificate

Whether you are entitled to claim a certain number of allowances or exemptions from withholding is subject to review by KDOR. Your employer may be required to send a copy of this form to KDOR.

1 Print your first name and middle initial		Last Name		2 Social Security Number	
Mailing Address			3 Allowance Rate		
City or Town, State, and ZIP Code			Mark the allowance rate selected in line A above.		
			<input type="checkbox"/> Single		<input type="checkbox"/> Joint
4 Total number of allowances you are claiming (from line G above).....				4	
5 Enter any additional amount you want withheld from each paycheck (this is optional)				5	\$
6 I claim exemption from withholding. You must meet the conditions explained in the "Exemption from withholding" instructions above. If you meet those conditions, write "Exempt" on this line. Note: KDOR will receive your federal W-2 forms for all years claimed <i>Exempt</i> .				6	
Under penalties of perjury, I declare that I have examined this certificate and to the best of my knowledge and belief it is true, correct, and complete.					
SIGN HERE ►					
7 Employer's name and address				8 EIN (Employer Identification Number)	
DATE					

Form W-4 (2011)

Purpose. Complete Form W-4 so that your employer can withhold the correct federal income tax from your pay. Consider completing a new Form W-4 each year and when your personal or financial situation changes.

Exemption from withholding. If you are exempt, complete **only** lines 1, 2, 3, 4, and 7 and sign the form to validate it. Your exemption for 2011 expires February 16, 2012. See Pub. 505, Tax Withholding and Estimated Tax.

Note. If another person can claim you as a dependent on his or her tax return, you cannot claim exemption from withholding if your income exceeds \$950 and includes more than \$300 of unearned income (for example, interest and dividends).

Basic instructions. If you are not exempt, complete the **Personal Allowances Worksheet** below. The worksheets on page 2 further adjust your withholding allowances based on itemized deductions, certain credits, adjustments to income, or two-earners/multiple jobs situations.

Complete all worksheets that apply. However, you may claim fewer (or zero) allowances. For regular wages, withholding must be based on allowances you claimed and may not be a flat amount or percentage of wages.

Head of household. Generally, you may claim head of household filing status on your tax return only if you are unmarried and pay more than 50% of the costs of keeping up a home for yourself and your dependent(s) or other qualifying individuals. See Pub. 501, Exemptions, Standard Deduction, and Filing Information, for information.

Tax credits. You can take projected tax credits into account in figuring your allowable number of withholding allowances. Credits for child or dependent care expenses and the child tax credit may be claimed using the **Personal Allowances Worksheet** below. See Pub. 919, How Do I Adjust My Tax Withholding, for information on converting your other credits into withholding allowances.

Nonwage income. If you have a large amount of nonwage income, such as interest or dividends, consider making estimated tax payments using

Form 1040-ES, Estimated Tax for Individuals. Otherwise, you may owe additional tax. If you have pension or annuity income, see Pub. 919 to find out if you should adjust your withholding on Form W-4 or W-4P.

Two earners or multiple jobs. If you have a working spouse or more than one job, figure the total number of allowances you are entitled to claim on all jobs using worksheets from only one Form W-4. Your withholding usually will be most accurate when all allowances are claimed on the Form W-4 for the highest paying job and zero allowances are claimed on the others. See Pub. 919 for details.

Nonresident alien. If you are a nonresident alien, see Notice 1392, Supplemental Form W-4 Instructions for Nonresident Aliens, before completing this form.

Check your withholding. After your Form W-4 takes effect, use Pub. 919 to see how the amount you are having withheld compares to your projected total tax for 2011. See Pub. 919, especially if your earnings exceed \$130,000 (Single) or \$180,000 (Married).

Personal Allowances Worksheet (Keep for your records.)

A	Enter "1" for yourself if no one else can claim you as a dependent	A	<u> </u>
B	Enter "1" if: { <ul style="list-style-type: none"> • You are single and have only one job; or • You are married, have only one job, and your spouse does not work; or • Your wages from a second job or your spouse's wages (or the total of both) are \$1,500 or less. }	B	<u> </u>
C	Enter "1" for your spouse . But, you may choose to enter "-0-" if you are married and have either a working spouse or more than one job. (Entering "-0-" may help you avoid having too little tax withheld.)	C	<u> </u>
D	Enter number of dependents (other than your spouse or yourself) you will claim on your tax return	D	<u> </u>
E	Enter "1" if you will file as head of household on your tax return (see conditions under Head of household above)	E	<u> </u>
F	Enter "1" if you have at least \$1,900 of child or dependent care expenses for which you plan to claim a credit (Note. Do not include child support payments. See Pub. 503, Child and Dependent Care Expenses, for details.)	F	<u> </u>
G	Child Tax Credit (including additional child tax credit). See Pub. 972, Child Tax Credit, for more information. <ul style="list-style-type: none"> • If your total income will be less than \$61,000 (\$90,000 if married), enter "2" for each eligible child; then less "1" if you have three or more eligible children. • If your total income will be between \$61,000 and \$84,000 (\$90,000 and \$119,000 if married), enter "1" for each eligible child plus "1" additional if you have six or more eligible children 	G	<u> </u>
H	Add lines A through G and enter total here. (Note. This may be different from the number of exemptions you claim on your tax return.) ▶	H	<u> </u>
	For accuracy, complete all worksheets that apply. { <ul style="list-style-type: none"> • If you plan to itemize or claim adjustments to income and want to reduce your withholding, see the Deductions and Adjustments Worksheet on page 2. • If you have more than one job or are married and you and your spouse both work and the combined earnings from all jobs exceed \$40,000 (\$10,000 if married), see the Two-Earners/Multiple Jobs Worksheet on page 2 to avoid having too little tax withheld. • If neither of the above situations applies, stop here and enter the number from line H on line 5 of Form W-4 below. }		

----- Cut here and give Form W-4 to your employer. Keep the top part for your records. -----

Form W-4 Department of the Treasury Internal Revenue Service	<h2 style="margin: 0;">Employee's Withholding Allowance Certificate</h2> <p style="margin: 0;">▶ Whether you are entitled to claim a certain number of allowances or exemption from withholding is subject to review by the IRS. Your employer may be required to send a copy of this form to the IRS.</p>	OMB No. 1545-2159 2011
1 Type or print your first name and middle initial. Last name		2 Your social security number
Home address (number and street or rural route)		3 <input type="checkbox"/> Single <input type="checkbox"/> Married <input type="checkbox"/> Married, but withhold at higher Single rate. Note. If married, but legally separated, or spouse is a nonresident alien, check the "Single" box.
City or town, state, and ZIP code		4 If your last name differs from that shown on your social security card, check here. You must call 1-800-772-1213 for a replacement card. ▶ <input type="checkbox"/>
5 Total number of allowances you are claiming (from line H above or from the applicable worksheet on page 2)	5 <u> </u>	
6 Additional amount, if any, you want withheld from each paycheck	6 \$ <u> </u>	
7 I claim exemption from withholding for 2011, and I certify that I meet both of the following conditions for exemption. <ul style="list-style-type: none"> • Last year I had a right to a refund of all federal income tax withheld because I had no tax liability and • This year I expect a refund of all federal income tax withheld because I expect to have no tax liability. If you meet both conditions, write "Exempt" here ▶		7 <u> </u>
Under penalties of perjury, I declare that I have examined this certificate and to the best of my knowledge and belief, it is true, correct, and complete.		
Employee's signature (This form is not valid unless you sign it.) ▶		Date ▶
8 Employer's name and address (Employer: Complete lines 8 and 10 only if sending to the IRS.)		9 Office code (optional)
		10 Employer identification number (EIN)