



EMPLOYEE ENROLLMENT

This form is the first step in the enrollment and onboarding process with Public Partnerships LLC (PPL). The details you provide on this form will be used for both employment and payment choices. Please complete this form.

Employee Name

First:

Middle:

Last:

Maiden or Previous Last:

Employee Address (where you live)

Street (no PO Box):

Street 2 (APT., STE., etc.):

City:

State:

Zip Code:

County:

Select if address where you live is the same as mailing address

If not, complete the Mailing Address section below.

Address:

Address 2 (APT., STE., etc.):

City:

State:

Zip Code:

Employee Personal Details

Date of Birth:

Social Security Number:

Gender (Optional):

Male

Female

Race (Optional):

Black Hispanic Asian/Pac. Island Nat. Amer. Or Alaskan White Other

Veteran Status (Optional):

Special Disabled Veteran

*Means (A) a veteran who is entitled to compensation (or who, but for the receipt of military retired pay, would be entitled to compensation) under laws administered by the Department of Veteran Affairs for a disability rate of 10-20% in the case of a veteran who has been determined to have a serious employment disability or (B) a person who was discharged or released from active duty because of a service connected disability.

Vietnam Era Veteran

*Means a veteran, any part of whose active military, naval or air service, was during the period August 5, 1964 through May 7, 1975 who (1) served on active military duty for a period of more than 180 days and was discharged or released there from with other than a dishonorable discharge, or (2) was discharged or released from active duty because of a service-connected disability. No veteran can be considered to be a veteran of the Vietnam era under this paragraph after December 31, 1994.

Employee Contact Details

We need to have two ways of reaching you. Email is preferred.

Email:

Cell Phone:

Home or Other Phone:

Public Partnerships can text me. They may text me at the cell phone number above. Yes No
I understand that carrier charges may apply.

Please select how you want to be paid: Direct Deposit to your Bank Account or by Debit Card. You will be paid by paper check until direct deposit is set up. It takes one to two pay periods for direct deposit to become active. If you need to update your bank account details, you must submit a Direct Deposit Update form.

Payment Information

Direct Deposit to Bank Account

Account Type (select one): Checking Savings

Bank Name:

Account Number:

<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
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Routing Number:

<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
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Deposit to Debit Card

If you select Debit Card as your payment method, you must provide PPL with an address where you live. If you work for more than one Participant, all payments will be on one debit card.

Pay Stub

Your pay stub is available through the web portal or the mobile app. If you do not have access to the internet, then select the checkbox below.

Please send my pay stub in the mail.

PPL Terms and Conditions

I understand and accept:

- PPL is not my Employer.
- PPL will help my Employer collect my personal details needed to complete the employment forms. PPL, as an FEA (Fiscal Employer Agent), will support my Employer in processing their taxes and payroll tasks.
- Information provided to PPL, on behalf of my Employer, can/will be used to fill required forms for employment that are required under Federal/State and Self-Directed Services programs.
- PPL will collect my account numbers only to process my payment on behalf of my Employer.
- PPL will process my payment only after my Employer approves my service shift.
- Through PPL I can select my preferred method of contact. PPL can contact me through phone calls, email, and regular mail with details provided by me.
- If I want to find out other ways PPL might use my details, I can find it in PPL's Privacy Policy on their website.

Agree and Sign

I confirm:

- I have read all of this form.
- The details I have provided are accurate and complete.
- Any false statement on this form may result in my dismissal.
- This document is not a contract between the Employee, PPL, or the State.
- Employment depends on verifying my right to work in the US.
- PPL can deposit my payment directly into my bank account based on my choice above.
- If I fail to provide complete and accurate information on this form, processing may be delayed or made impossible, or my electronic payments may be incorrectly made.
- PPL can withdraw from the designated account all amounts deposited electronically in error.
- If my account is closed, or does not have enough money to allow withdrawal, PPL can withhold any payment owed to me until the incorrect deposited amounts are repaid.
- Before I spend money from my wages, I must ensure the money has been deposited into my account. I agree PPL is not responsible for any insufficient funds fee(s) or any other fees or charges on my account(s).
- If I want to cancel direct deposit, I will contact PPL customer service and provide both the account and routing number.

Employee Signature:

Date: