

MINNESOTA NEW HIRE REPORTING FORM
EMPLOYER INFORMATION

41 - 6007513

Federal Employer Identification Number

UNIVERSITY OF MINNESOTA

Company Name

1300 South 2nd Street, Suite 645

Street Address Line 1

Minneapolis

City

MN

State

55454

Zip Code

IRA WHIPPLE

Employer Contact

Street Address Line 2

(612) 624-4066

Contact Phone

NEW OR REHIRED EMPLOYEE INFORMATION

Last Name

First Name

Middle Name/Initial

Street Address

City

State

Zip Code

Social Security Number

Date of Birth (OPTIONAL)