



**HARRIS**

# **Employee Self Service (ESS)**

**Version 2.15**

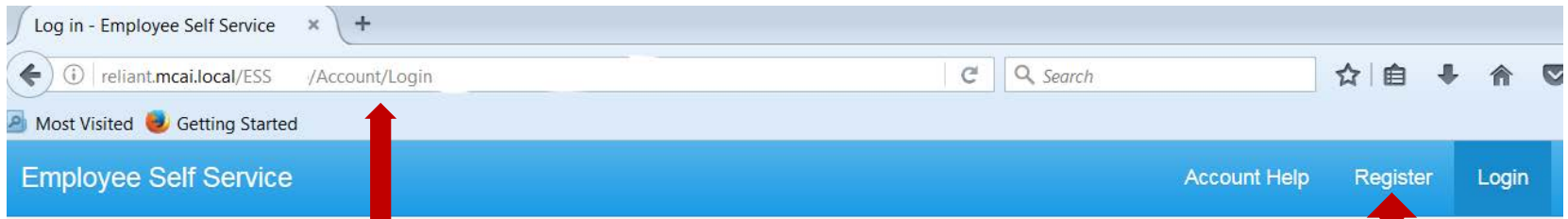
# *Employee Self Service*

Employees can...

- access from any computer.
- view their elected withholding, earnings summary, check history, company documents, leave balances and leave history.
- request changes to their demographics, direct deposits, W4 and state tax withholding forms.
- upload documents for demographic and direct deposit request.
- print past check information.
- print W2s for past years.

# Employee Self Service – Register

## Registration on Log In screen



Enter Web Address for ESS into your browser.

Log in

User  
name

Password



Log in

Everyone must register as a user for ESS using their social security number and employee number.

**NOTE:** Internet Explorer version 9 and below are not supported in ESS.  
The Internet Explorer browser must be version 10 or above.

# Employee Self Service - Register

All employees must create an account in ESS.

ESS

## Create a New Account

Use the form below to create a new account.

Passwords are required to be a minimum of 6 characters in length.

User name

Email

First Name

Last Name

Social Security Number

Employee Number

Password

Confirm password

**Message**

Thank you for registering. An email has been sent to [redacted]. Please check your email and use the enclosed link to finish registration. If you do not receive an email to confirm your account please contact your System Administrator.

Employee chooses their own User Name and Password. User name should not contain any special characters or spaces.

Social Security Number and Employee Number combination is validated in the payroll system.

Email address will be used to send all notifications from ESS. This does NOT have to be a school district assigned email address. It may be an employee's personal email address.

## Your Employee Self Service account confirmation

me@me.com

Sent: Fri 5/16/2014 9:50 AM

To: Angela Palmire

Thank you for signing up with us! Please confirm your registration by clicking the following link:

[Confirmation Link](#)

In case you need it, here's the confirmation code: **dIKg0-xx2c3iCLQ8mv\_BQ2**

An email, with a confirmation link, will be sent to the email address the user provided when creating their account. User must use the confirmation link in the email to be confirmed as an authorized user for ESS. Once the employee has been confirmed as a user, they can login in with their user name and password.

# Employee Self Service – Account Help

*Account Help* allows the employee to recover their password.

Employee Self Service

Account Help

Register

Login

## Forgot Password

User Name

OR

Employee  
Number

8467

Recover

Back

The *Account Help* allows a registered employee to recover their password with the *Forgot Password* recovery. The employee must enter their User Name or Employee Number and press the *Recover* button. An email with a 'reset password' link will be sent to employee's ESS email address. Once the employee clicks on the link in the email, a computer generated password is assigned to their user name. The employee will receive a message and a email with the new password. The employee can then login with the new password. The password can be changed (instructions on page 33). The *Forgot Password* will not work if the employee's account has not been confirmed (see previous screen).

Reply Reply All Forward IM



Thu 1/12/2017 1:16 PM

nextgeness@gmail.com

Password Reset Token

To

**Please find the Password Reset Token for user name: lamason**

[Reset Password](#)

Account Help

Register

Login

Message

Success! Your new password is:  
!AWJPp



Thu 1/12/2017 1:17 PM

nextgeness@gmail.com

New Ess Password

To

ire

**Please find the Password Reset Token  
!AWJPp**

# Employee Self Service – Account Help

*Account Help* allows the employee to recover their user name.

Employee Self Service

Account Help

Register

Login

Forgot Username

Employee Number

8467

Employee Email

amazon3434343@hotmail.com

Recover

Back

Reply

Reply All

Forward

IM

Thu 1/12/2017 1:14 PM

nextgeness@gmail.com

ESS User Name

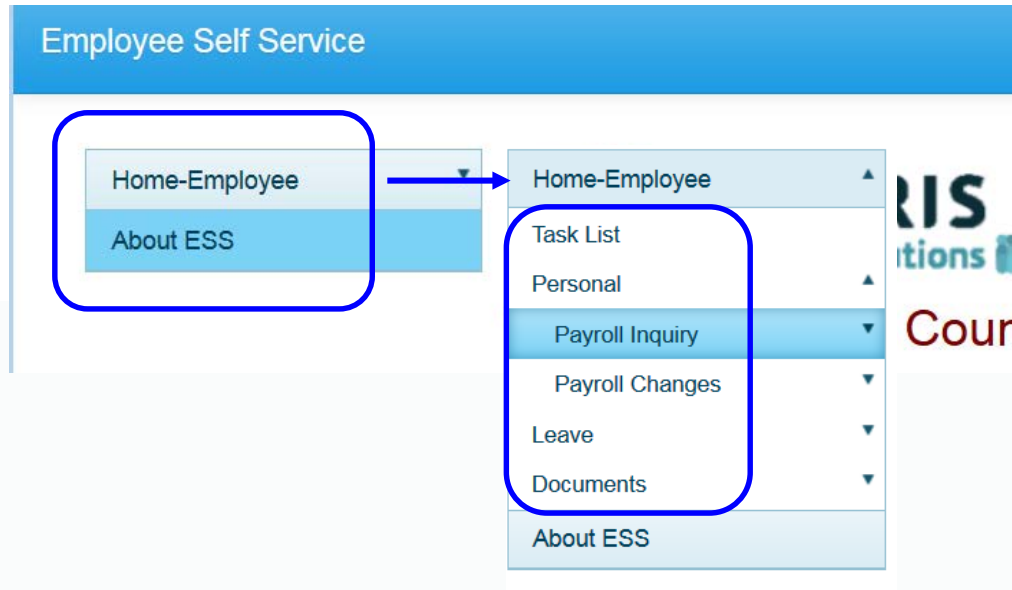
To

**ESS User Name: lamason**

The *Account Help* allows a registered employee to recover their user name with the *Forgot Username* recovery. The employee must enter their Employee Number and their ESS email address and press the *Recover* button. An email with their user name will be sent to the employee's ESS email address. If the email address entered does not agree with the email address the employee register with, a message will be displayed and no email will be sent. The *Forgot Username* will not work if the employee's account has not been confirmed (see page 4).

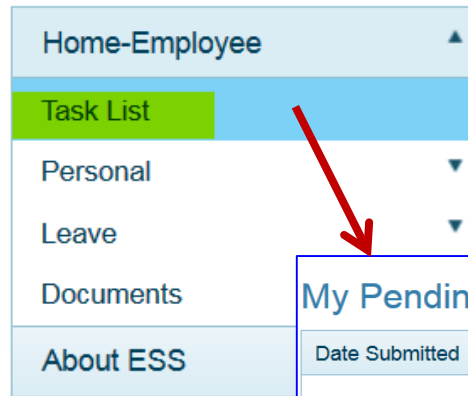
# Employee Self Service – Home Menu

Home screen menu will have Home–Employee and About ESS. The Home-Employee menu opens to other menu options. Employee will follow the links to the menu options they want. If user is an Administrator for ESS, they will also see Site Administration in their Home screen menu options.



# Employee Self Service - Task List

Employee can view or cancel pending requests and view past requests.



Task List will displays a summary of all the employee's pending change requests.

My Pending Requests					
Date Submitted	Request Type	Description			
01/03/2017 02:28:30PM	A4	A4 Change Request for .	<a href="#">▲ View Details</a>	<a href="#">× Cancel</a>	
01/03/2017 01:47:53PM	Demographic	Demographic Change Request for	<a href="#">▲ View Details</a>	<a href="#">× Cancel</a>	

[View My Past/Current Requests](#)

Completed Requests (approved or rejected) can be viewed by the employee with the *View My Past/Current Requests*.

Details for the pending request can be viewed by employee.

Pending requests (unapproved) can be cancelled by employee.



# Employee Self Service – Task List

An employee who is also an Approver will have both their requests and the Approver Tasks displayed on their Tasks menu.

Site Administration

Home-Employee

**Task List**

Personal

Leave

Documents

About ESS

### Approver Tasks

Date Submitted	Request Type	Approver Role	Description
01/03/2017 12:41:54PM	A4	HrApprover	A4 Change Request for
01/03/2017 01:47:53PM	Demographic	HrApprover	Demographic Change Request for
01/04/2017 10:50:12AM	RequisitionRequest	PurchasingApprover	Requisition Request for

[View Completed Approver Tasks](#)

### My Pending Requests

Date Submitted	Request Type	Description
01/03/2017 12:41:54PM	A4	A4 Change Request for

[View My Past/Current Requests](#)

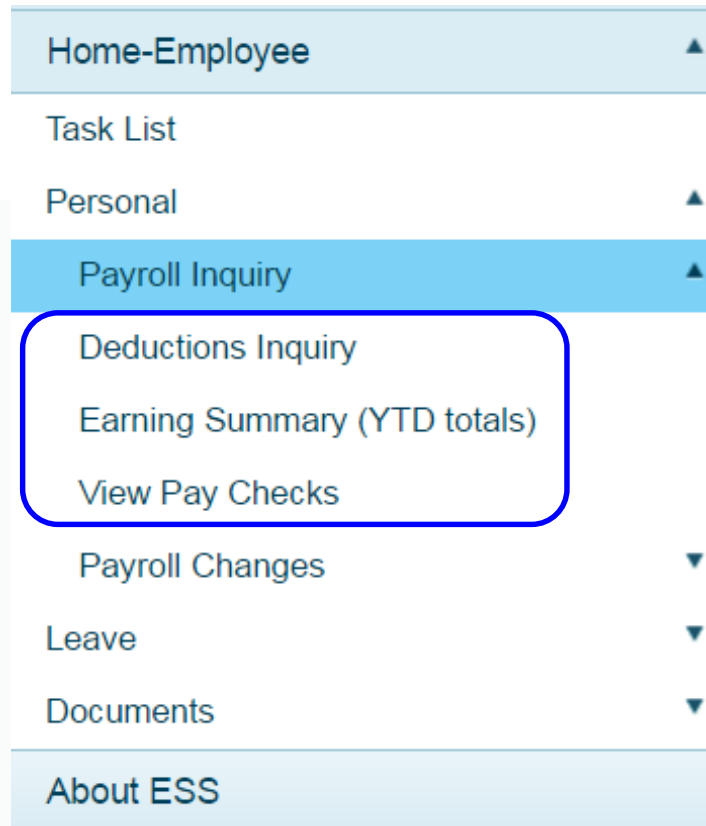
The Approver can approve or reject pending requests from employees on the Task List menu under Approver Task.

Approvers can view request history with the *View Completed Approver Tasks*.

Completed requests (approved or rejected) can be viewed by the employee with the *View My Past/Current Requests*.

# *Employee Self Service–Personal/Payroll Inquiry*

The Personal menu contains the sub-menu for Payroll Inquiry which includes the Inquiries available for the employee.



# Employee Self Service – Deduction Inquiry

The Deduction Inquiry allows for viewing and printing the employee and employer cost for employee elected deductions.

## Payroll Deductions

### User Instructions

Insurance elections can only be changed during open enrollment with the exemption of life changing events such as the birth of a child, death, divorce, retirement. See your insurance handbook for further explanation of life changing events.

Back		Print	
Deduction	Employee Cost	Employer Cost	
MAT INSURANCE	\$0.00	\$780.00	▲
RETIREMENT W/H	7.5000 %	11.9400 %	
AlaTrust Credit Union	\$100.00	\$0.00	
AMERICAN FAMILY LIFE INS	\$21.00	\$0.00	
LIBERTY NATIONAL INS	\$224.75	\$0.00	
PRE-PAID LEGAL SERVICES, INC.	\$15.95	\$0.00	
LIFE INS COMPANY OF ALABAMA	\$49.77	\$0.00	
PUBLIC ED EMP HEALTH INS PRO	\$15.00	\$0.00	
LIBERTY NATIONAL INSURANCE	\$0.00	\$0.00	
SECURITY BENEFIT-457	\$25.00	\$0.00	
HEALTHCARE SPENDING ACCT.	\$0.00	\$0.00	

# Employee Self Service – Earnings Summary

Employees can view and print their earnings summary by selecting the year they wish to view.

Earnings Summary

Back

Print

Earnings Year

2016

Gross Wages

\$11,422.90

Federal Wages

\$10,366.20

Federal Tax Withheld

\$714.83

Social Security Wages

\$11,347.90

Social Security Tax Withheld

\$703.56

Medicare Wages

\$11,347.90

Medicare Tax Withheld

\$164.55

State Wages

\$11,222.90

State Tax Withheld

\$401.14

If the district uses Harris School Solutions' Document Services product to produce their W2 records, the employee can view and print their W2 for the selected year.

\$646.29

Copy 8-To Be Filed With Employee FEDERAL Tax Return			38-209903 OMB No. 1545-0008	
a Employee soc. sec. no.		1 Wages, tips, other comp. 18,389.49	2 Federal income tax withheld 935.71	
b Employer ID number (EIN)		3 Social security wages 20,353.68	4 Social security tax withheld 1,261.98	
		5 Medicare wages and tips 20,353.68	6 Medicare tax withheld 295.09	
c Employer name, address, and ZIP code Bibb County Board of Education				
d Control Number 82				
e Employee name, address, and ZIP code				
7 Social security tips	8 Allocated tips	9 Advance EIC payment		
10 Dependent care benefits	11 Nonqualified plans	12a Code See inst. for box 12 DD	12b Code See inst. for box 12 DD 9,837.24	
13 Statutory Employee	14 Other	12c Code	12d Code	
Retirement plan	CAF 1,836.00 414 1,664.19 DUE 273.95	G 300.00		
Third-party sick pay				
AL 037615		20,053.68	646.29	
15 State Employer state ID number	16 State wages, tips, etc.	17 State income tax		
18 Local wages, tips, etc.	19 Local income tax	20 Locality name		

Copy 2-To Be Filed With Employee State City, or Local Income Tax Return			38-209903 OMB No. 1545-0008	
a Employee soc. sec. no.		1 Wages, tips, other comp. 18,389.49	2 Federal income tax withheld 935.71	
b Employer ID number (EIN)		3 Social security wages 20,353.68	4 Social security tax withheld 1,261.98	
		5 Medicare wages and tips 20,353.68	6 Medicare tax withheld 295.09	
c Employer name, address, and ZIP code				
d Control Number 82				
e Employee name, address, and ZIP code				
7 Social security tips	8 Allocated tips	9 Advance EIC payment		
10 Dependent care benefits	11 Nonqualified plans	12a Code See inst. for box 12 DD	12b Code See inst. for box 12 DD 9,837.24	
13 Statutory Employee	14 Other	12c Code	12d Code	
Retirement plan	CAF 1,836.00 414 1,664.19 DUE 273.95	G 300.00		
Third-party sick pay				
AL 037615		20,053.68	646.29	
15 State Employer state ID number	16 State wages, tips, etc.	17 State income tax		
18 Local wages, tips, etc.	19 Local income tax	20 Locality name		

# Employee Self Service – View Pay Checks

Employee can view and print check/statement summary for a specific check date range. The employee can view check detail by clicking on a particular check.

## My Checks

Start Date  

End Date   [Search](#)

[Back](#) [Print](#)

Select date range and click Search to list pay records. Select check number from list to view pay record.

Date	Number	Date	Gross	Net	Pay Adj.-Sub Info
05/31/2016	133504 - (Check)	05/31/2016	\$2,248.58	\$1,190.99	
04/29/2016	133350 - (Check)	04/29/2016	\$2,288.58	\$1,217.66	
03/31/2016	133174 - (Check)	03/31/2016	\$2,258.58	\$1,197.66	
02/29/2016	133011 - (Check)	02/29/2016	\$2,298.58	\$1,224.23	
01/31/2016	132855 - (Check)	01/31/2016	\$2,328.58	\$1,244.23	
12/18/2015	132689 - (Check)	12/18/2015	\$2,298.58	\$1,223.44	
11/20/2015	132524 - (Check)	11/20/2015	\$2,308.58	\$1,230.10	
10/30/2015	132369 - (Check)	10/30/2015	\$2,448.58	\$1,323.13	
09/30/2015	132208 - (Check)	09/30/2015	\$2,278.58	\$1,210.20	
08/31/2015	132074 - (Check)	08/31/2015	\$2,468.58	\$1,336.35	
07/31/2015	131943 - (Check)	07/31/2015	\$2,458.58	\$1,329.69	
06/30/2015	131756 - (Check)	06/30/2015	\$2,308.58	\$1,230.10	

# Employee Self Service – View Pay Checks

If an employee has extra pay, pay adjustments or substitute pay for a specific check, they can view detail information about the pay by clicking on *Adjusts/Sub Details* link.

## My Checks

Start Date 1/1/2015



End Date 6/4/2016



Search

Back

Print

Select date range and click Search to list pay records. Select check number from list to view pay record.

Date	Number	Date	Gross	Net	Pay Adj.-Sub Info
05/31/2016	133579 - (Check)	05/31/2016	\$195.00	\$180.08	<a href="#">Adjusts/Sub Details</a>
04/29/2016	133425 - (Check)	04/29/2016	\$65.00	\$60.03	<a href="#">Adjusts/Sub Details</a>
03/31/2016	133252 - (Check)	03/31/2016	\$195.00	\$180.08	<a href="#">Adjusts/Sub Details</a>
02/29/2016	133089 - (Check)	02/29/2016	\$260.00		
12/18/2015	132769 - (Check)	12/18/2015	\$130.00		
11/20/2015	132602 - (Check)	11/20/2015	\$195.00		
10/30/2015	132437 - (Check)	10/30/2015	\$227.50		

### Pay Adj.-Sub Info

#### Adjustments to Pay/Substitutes List for:

Subbed For	Date	Day(s)	Pay Rate	Paid
WILLIAMS,	4/28/2016	0.50	\$65.00	\$32.50
WILLIAMS	4/26/2016	0.50	\$65.00	\$32.50
SMITH,	4/4/2016	0.50	\$65.00	\$32.50
LIGHTSEY,	4/26/2016	0.50	\$65.00	\$32.50
CHUC,	4/14/2016	0.50	\$65.00	\$32.50
CHUC,	4/15/2016	0.50	\$65.00	\$32.50
Totals		3		\$195.00

# Employee Self Service – View Pay Checks

Employee's detail check information can be displayed and printed.

## Check Detail

deedee

xxx-xx-1171  
1ST AVENUE  
WATSON, AL 35181

Print button.

## Check Information

Check Date: 02/28/2013  
Pay Period Ending: 02/28/2013  
Check Number: 124420  
Note:



## Net Pay

Category	Current	Ytd
Gross Pay	\$7,440.32	\$10,841.24
Total Deductions - Mandatory	(\$1,664.78)	(\$2,464.39)
Total Deductions - Other	(\$610.42)	(\$917.89)
Net Pay	\$5,165.12	\$7,458.96

## Earnings

Category	Current	Ytd	Hrs
REGULAR	\$7,440.32	\$10,841.24	0.00
Total Earnings	\$7,440.32	\$10,841.24	0.00

## Bank Accounts

Category	Account	Amount
-	****1255	\$5,165.12
Total Earnings		\$5,165.12

## Deductions - Mandatory

Category	Current	Ytd
FICA	\$569.18	\$829.35
Federal	\$800.97	\$1,203.66
State	\$294.63	\$431.38
Total Deductions - Mandatory	\$1,664.78	\$2,464.39

## Deductions - Other

Category	Current	Ytd
RETIREMENT W/H	\$558.02	\$813.09
AEA NON CERTIFIED DUES	\$11.65	\$23.30
NEA NON CERTIFIED DUES	\$10.75	\$21.50
VALIC ANNUITY WITHHOLDINGS	\$30.00	\$60.00
Total Deductions - Other	\$610.42	\$917.89



# Employee Self Service – View Pay Checks

If the district is using Harris School Solutions' Document Service product to produce their checks and statements, the check/statement detail will display as a copy of the original check/statement. The employee can also print a copy of the displayed check/statement.

Check Detail

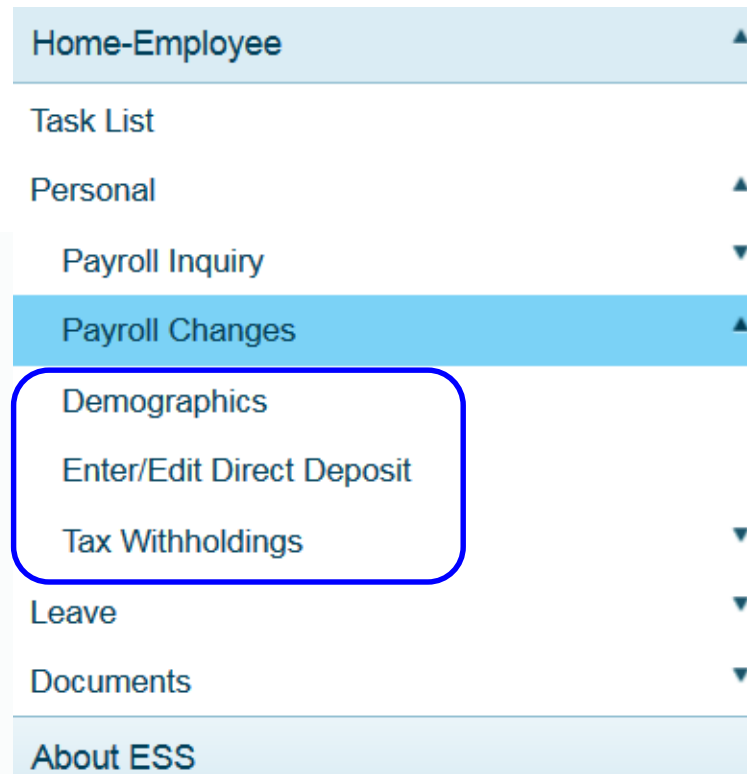
Page: 1 of 1 Automatic Zoom

HARRIS SCHOOL DISTRICT BOE										
EMPLOYEE NAME	EMPLOYEE NUMBER	PAY PERIOD END	DEPOSIT DATE	DEPOSIT NUMBER						
ELIZABETH TAYLOR	999999	10/15/2013	10/31/2013	485664						
DESCRIPTION	CURRENT AMOUNT	DESCRIPTION	CURRENT AMOUNT	YTD AMOUNT						
Regular Pay	5,852.85	FED WH	819.74	5,138.54						
		STATE WH	263.33	2,354.21						
		SS WH	324.20	324.20						
		MC WH	75.82	678.30						
		VALIC - G.	58.53	523.97						
		POCO - G.F	402.00	3,618.00						
		HEALTH-CAF	401.48	3,613.32						
		VISION-CAF	13.97	125.73						
		FLEX MEDCL	208.33	1,874.97						
		DISABILITY	66.99	602.91						
		UNUM PROD	19.89	179.01						
		TRS RETIRE	351.17	3,143.57						
		FNB POLK	2,847.40	30,216.28						
GROSS PAY	5,852.85									
FRINGE BENEFIT	0.00			0.00						
LEAVE DESCRIPTION	BALANCE	TAKEN								
SICK LEAVE	19.00	0.50								
Open Enrollment - October 21-November 8, 2013			NET DEPOSIT	0.00						
CSI TECHNOLOGY OUTFITTERS MOBILE, ALABAMA			485664							
DEPOSIT	****VOID****VOID****VOID*** DIRECT DEPOSIT ****VOID****VOID****VOID****VOID****		<table><thead><tr><th>DEPOSIT DATE</th><th>DEPOSIT NO.</th><th>AMOUNT</th></tr></thead><tbody><tr><td>10/31/2013</td><td>485664</td><td>0.00</td></tr></tbody></table>		DEPOSIT DATE	DEPOSIT NO.	AMOUNT	10/31/2013	485664	0.00
DEPOSIT DATE	DEPOSIT NO.	AMOUNT								
10/31/2013	485664	0.00								
TO THE ORDER OF	ELIZABETH TAYLOR 541 EAST MAIN STREET ROME, GA 30161									
NON-NEGOTIABLE DIRECT DEPOSIT										

Print toolbar is at bottom of check display.

# *Employee Self Service–Personal/Payroll Changes*

The Personal menu contains the sub-menu for Payroll Changes which includes a menu of all change options available to the employee.



# Employee Self Service - Demographics

Employee can request changes to a variety of demographic fields and upload multiple documents to be submitted with their change request. Both the employee and the approver can print the attached documents from the pending or completed request/task.

## Demographic Change Request

Pending

Save Back Print

Information can be printed by selecting Print.

If employee has a pending request, their demographics will be displayed with the requested changes. The employee can change all demographic data.

### User Instructions

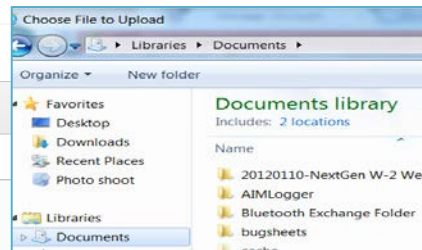
All changes to name require a copy of social security card with same name. Please attach copy of social security card or bring your card by the Payroll department.

First Name	BRENDA	Middle Name	
Last Name	ANDY	Birthday	8/2/1974
Email	ANDY_B@HARRISSCHOOL.ORG	Gender	Female
Address 1	P. O. BOX 7450	Address 2	4254 ROSSON STREET
City	BAY SAINT LOU	State	MS
Home Phone	8827845121	Zip Code	39520-1032
		Cell Phone	5157458963

### Attachments

Select files...

Welcome Scan.jpg



Multiple files can be selected from multiple directories. Acceptable file formats include .gif, .jpg, .jpeg, .png, .doc, .docx, .xls, .xlsx, .pdf, .txt.

NOTE: A change to the email address on the demographic screen changes the email address in the payroll system which may be used by the school district when corresponding with the employee. It does not change the email address for the ESS notifications which was entered when the employee registered for ESS.

# Employee Self Service-Edit/Enter Direct Deposit


Employees can submit requests to add, delete, or change direct deposit accounts.

Edit Direct Deposit Account(s)

[Back](#) [Print](#)

[+ Add new record](#) [Cancel changes](#)

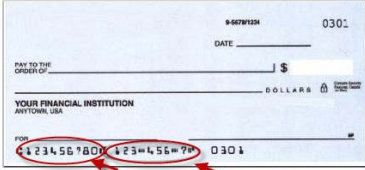
Bank Name	Account	Routing	Account Type	Primary	Amount	
ALABAMA ONE CREDIT UNION	42421255	262277189	Checking	true	\$0.00	<a href="#">x Delete</a>
ALABAMA ONE CREDIT UNION 2	521215	262277189	Checking	false	\$25.00	<a href="#">x Delete</a>

Where do I find bank account and routing numbers? 

[Save](#) [Back](#)

Confirm

Check Sample



Routing # Account #

If changing a routing number or the amount to deposit, click in the field, make the change and click submit.

If adding a new account, click on *Add New Record*, enter the information for the new account and click submit. Note: There can be only one primary account per employee.

If you are trying to delete a direct deposit, click on the *Delete* button beside the account information and then click submit.

# Employee Self Service-Edit/Enter Direct Deposit

Pending changes are displayed and employees can upload files for direct deposit requests.

Edit Direct Deposit Account(s)

Pending

Back Print

+ Add new record - Cancel changes

Bank Name	Account	Routing	Account Type	Primary	Amount	
ALABAMA ONE CREDIT UNION	42421255	262277189	Checking	true	\$0.00	x Delete
ALABAMA ONE CREDIT UNION	52121599	262277189	Checking	false	\$25.00	x Delete

Where do I find bank account and routing numbers?

Save Back

Attachments

Select files...

harris\_school\_solutions\_logo\_sm...

Instructions

Please upload copy of voided check for all new direct deposit records for verification of information.

Choose File to Upload

Libraries Documents

Organize New folder

Favorites Desktop Downloads Recent Places Photo shoot

Documents library Includes: 2 locations

Name

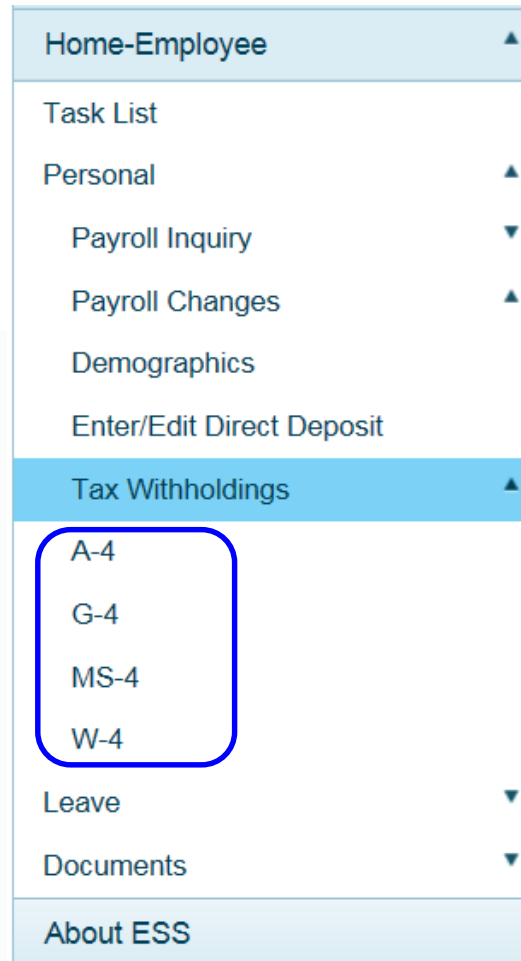
- 20120110-NextGen W-2 Webs
- AIMLogger
- Bluetooth Exchange Folder
- bugsheets

If employee has a pending request, their direct deposit information will be displayed with the requested changes. The employee can change all pending direct deposit data.

Multiple files can be selected from multiple directories. Acceptable file formats include .gif, .jpg, .jpeg, .png, .doc, .docx, .xls, .xlsx, .pdf, .txt.

# *Employee Self Service – Tax Withholdings*

Tax Withholding under the sub menu Payroll Changes will include your State Withholding and W-4 Withholding Forms.



# Employee Self Service – A4 (Alabama)

Changes can be made to the employee's A4 with an electronic signature.

## Current State of Alabama Employee's Withholding Allowances

Withholding Status	Exemptions	Dependents	Addl. Amt	Exempt
Single	1	0	0.00	<input type="checkbox"/>

Employee's current State withholding information is displayed.

## User Instructions

All employees need to print a copy of new A4 for their records. Please see open task or completed task for the a copy of your new A4.

[A4 Instructions](#)

Employee can view additional instructions for the A4 by clicking the *A4 Instructions* button.

Save

Back

FORM

**A-4** REV. 3/2014

## ALABAMA DEPARTMENT OF REVENUE Employee's Withholding Exemption Certificate

EMPLOYEE'S FULL NAME		SOCIAL SECURITY NO. XXX-XX-	
HOME ADDRESS	62	ROAD	CITY MOUNDVILLE
STATE AL		ZIP 35474	
SIGNATURE		DATE	
		(6/6/2016)	

Electronic signature and date must be exactly as displayed – no extra spaces, dashes or periods.

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.

### HOW TO CLAIM YOUR WITHHOLDING EXEMPTIONS

1. If you claim no personal exemption for yourself, write the figure "0", sign and date Form A-4 and file it with your employer.
2. If you are SINGLE or MARRIED FILING SEPARATELY a \$1,500 personal exemption is allowed. Write the letter "S" if claiming the SINGLE exemption or "MS" if claiming the MARRIED FILING SEPARATELY exemption.  
(Choose S or MS)
3. If you are MARRIED or SINGLE CLAIMING HEAD OF FAMILY, a \$3000 personal exemption is allowed. Write the letter "M" if you are claiming an exemption for both yourself and your spouse or "H" if you are single with qualifying dependents and are claiming HEAD OF FAMILY exemption.  
(Choose M or H)
4. Number of dependents (other than spouse) that you will provide more than one-half of the support for during the year. See instructions for dependent qualifications.
5. Additional amount, if any, you want deducted each pay period.
6. **This line to be completed by your employer:** Total exemptions (example: employee claims "M" on line 3 and "2" on line 4. Employer should use column M-2 (married with 2 dependents) in the withholding tables).

EMPLOYER NAME

Board of Education

FEIN

EMPLOYER STATE ID

If requesting a change for A4, the employee must enter **ALL** information on the A4 form, not just the change.

# Employee Self Service – G4 (Georgia)

Changes can be made to the employee's G4 with an electronic signature.

Current State of Georgia Employee's Withholding Allowances

Withholding Status	Dependents	Emp./Spouse	Addl. Allowances	Addl. Amt	Exempt
MARRIED - FILING JOINT (B)	2	0	0	0.00	

G4 Instructions

Save Back

Form G-4 (Rev. 7/14)

**STATE OF GEORGIA EMPLOYEE'S WITHHOLDING ALLOWANCE CERTIFICATE**

1a. YOUR FULL NAME \_\_\_\_\_ 1b. YOUR SOCIAL SECURITY NUMBER XXX-XX-XXXX

2a. HOME ADDRESS (Number, Street, or Rural Route) \_\_\_\_\_ 2b. CITY, STATE AND ZIP CODE GA 31721

**PLEASE READ INSTRUCTIONS BEFORE COMPLETING LINES 3-8**

**3. MARITAL STATUS**  
(If you do not wish to claim an allowance, enter "0" in the brackets beside your marital status.)

A. Single: Enter 0 or 1  **4. DEPENDENT ALLOWANCES**

B. Married Filing Joint, both spouses working: Enter 0 or 1  **5. ADDITIONAL ALLOWANCES**  
(worksheet below must be completed)

C. Married Filing Joint, one spouse working: Enter 0 or 1 or 2  **6. ADDITIONAL WITHHOLDING**

D. Married Filing Separate: Enter 0 or 1

E. Head of Household: Enter 0 or 1

**WORKSHEET FOR CALCULATING ADDITIONAL ALLOWANCES**  
(Must be completed in order to enter an amount on step 5)

1. COMPLETE THIS LINE ONLY IF USING STANDARD DEDUCTION:  
Yourself: ☐ Age 65 or over ☐ Blind  
Spouse: ☐ Age 65 or over ☐ Blind  
Number of boxes checked  x 1300

2. ADDITIONAL ALLOWANCES FOR DEDUCTIONS:  
A. Federal Estimated Itemized Deductions

B. Georgia Standard Deduction Single/Head of Household \$2,300 (enter one):   
Each Spouse \$1,500

C. Subtract Line B from Line A

D. Allowable Deductions to Federal Adjusted Gross Income

E. Add the Amounts on Lines 1, 2C, and 2D

F. Estimate of Taxable Income not Subject to Withholding

G. Subtract Line F from Line E (if zero or less, stop here)

H. Divide the Amount on Line G by \$3,000. Enter total here and on Line 5 above

(This is the maximum number of additional allowances you can claim. If the remainder is over \$1500 round up)

**7. Letter Used** (Marital Status A, B, C, D, or E)  **Total Allowances** (Total of Lines 3-5)

(Employer: The letter indicates the tax tables in the Employer's Tax Guide)

**8. EXEMPT:** (Do not complete Lines 3 - 7 if claiming exempt) **Read the Line 8 instructions on page 2 before completing this section.**  
a) I claim exemption from withholding because I incurred no Georgia income tax liability last year and I do not expect to have a Georgia income tax liability this year. **Check here** ☐

b) I certify that I am not subject to Georgia withholding because I meet the conditions set forth under the Servicemembers Civil Relief Act as amended by the Military Spouses Residency Relief Act as provided on page 2. My state of residence is  My spouse's (servicemember) state of residence is  The states of residence must be the same to be exempt. **Check here** ☐

I certify under penalty of perjury that I am entitled to the number of withholding allowances or the exemption from withholding status claimed on this Form G-4. Also, I authorize my employer to deduct per pay period the additional amount listed above.

Employee Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Employee's current State withholding information is displayed.

Employee can view instructions for the G4 by clicking the *G4 Instructions* button.

If requesting a change for G4, the employee must enter **ALL** information on the G4 form, not just the change.

Line 5 - Additional Allowances is updated from the worksheet entries and the *Update Line 5* button.

Electronic signature and date must be exactly as displayed – no extra spaces, dashes or periods.



# Employee Self Service – MS4 (Mississippi)

Changes can be made to the employee's MS4 with an electronic signature.

Current State of Mississippi Employee's Withholding

Withholding Status	Dependents	Emp./Spouse	Addl. Allowances	Addl. Amt	Total Exempt Amt	Exempt
Both Spouses Working	0	0	0	0.00	3000.00	

User Instructions  
Please print a copy of your new MS4 from your pending request or completed requests.

MS4 Instructions

Save Back

Form 89-350-13-6-1-000 (Rev. 05/15)

**MISSISSIPPI EMPLOYEE'S WITHHOLDING EXEMPTION CERTIFICATE**

Employee's Name: DIANA MCNEILL SSN: 597-82-9816

Employee's Residence Address: 2417 BURKE STREET, GULFPORT, MS 39507

Number and Street City or Town State Zip

Single ☐ Enter \$6,000 as exemption Amount Claimed: 0

Marital Status (Check One) ☐ (a) Spouse NOT employed: Enter \$12,000 Amount Claimed: 0  
☐ (b) Spouse IS employed: Enter that part of \$12,000 claimed by you in multiples of \$500. See instructions 2(b) below Amount Claimed: 0

Head of Family ☐ Enter \$9,500 as exemption. To qualify as head of family, you must be single and have a dependent living in the home with you. See instructions 2(c) and 2(d) below Amount Claimed: 0

Dependents: 0 You may claim \$1,500 for each dependent\*, other than for taxpayer and spouse, who receives chief support from you and who qualifies as a dependent for Federal income tax purposes. \* A head of family may claim \$1,500 for each dependents excluding the one which qualifies you as head of family. Multiply number of dependents claimed by you by \$1,500. Amount Claimed: 0

Age and Blindness: • Age 65 or older ☐ Husband ☐ Wife ☐ Single Amount Claimed: 0  
• Blind ☐ Husband ☐ Wife ☐ Single  
Multiply the number of blocks checked by \$1,500. Enter the amount claimed  
\* Note: No exemption allowed for age or blindness for dependents.

TOTAL AMOUNT OF EXEMPTION CLAIMED: 0

Additional dollar amount of withholding per pay period if agreed to by your employer: 0

SCRA ☐ If you meet the conditions set forth under the Service Member Civil Relief, as amended by the Military Spouses Residency Relief Act, and have no Mississippi tax liability, write "Exempt" on Line 8. You must attach a copy of the Federal Form DD-2058 and a copy of your Military Spouse ID Card to this form so your employer can validate the exemption claim.

I declare under the penalties imposed for filing false reports that the amount of exemption claimed on this certificate does not exceed the amount to which I am entitled or I am entitled to claim exempt status.

Employee Signature: DIANA MCNEILL Date: 6/7/2016

Employee's current State withholding information is displayed.

Employee can view instructions for the MS4 by clicking the *MS4 Instructions* button.

If requesting a change for MS4, the employee must enter **ALL** information on the MS4 form, not just the change.

The *Total Amount of Exemption Claimed* will be the total of selected status amount, dependent amount and additional allowances.

Electronic signature and date must be exactly as displayed – no extra spaces, dashes or periods.

# Employee Self Service – W4

Changes can be made to the employee's W4 with an electronic signature.

## Current Withholding Allowances

Type	Tax Status	Allowances	Addl. Amt	Exempt
Federal	Single	0	100.00	<input type="checkbox"/>
State	Single	0	0.00	<input type="checkbox"/>

Employee's current Federal and State withholding information is displayed.

Form **W-4**

Department of the Treasury  
Internal Revenue Service

### Employee's Withholding Allowance Certificate

OMB No. 1545-0074

**2016**

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.

[www.irs.gov/pub/irs-pdf/fw4.pdf](http://www.irs.gov/pub/irs-pdf/fw4.pdf)

[IRS.GOV W4 WorkSheet Application](#)

1. Your first name and middle initial  
DEEDEE S

Last Name  
COOKER

2. Your social security number  
XXX-XX-

Home address(number and street or rural route) Address  
P.O BOX 148

3

Note. If married, but legally separated, or spouse is a nonresident alien, check the "Single" box.

City or town, state, and ZIP code  
WEST BLOCTON, AL 35184

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. ☐

5 Total number of allowances you are claiming (from line H above or from the applicable worksheet on page 2)  
0

6 Additional amount, if any, you want withheld from each paycheck  
\$ 100.00

7 I claim exemption from withholding for 2016, and I certify that I meet both of the following conditions for exemption.  
• 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

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.) DEEDEE S COOKER

Date(m/d/yyyy) 6/7/2016

Employer Name/Address  
County Board of Education

Office Code(optional)

Employer FEIN

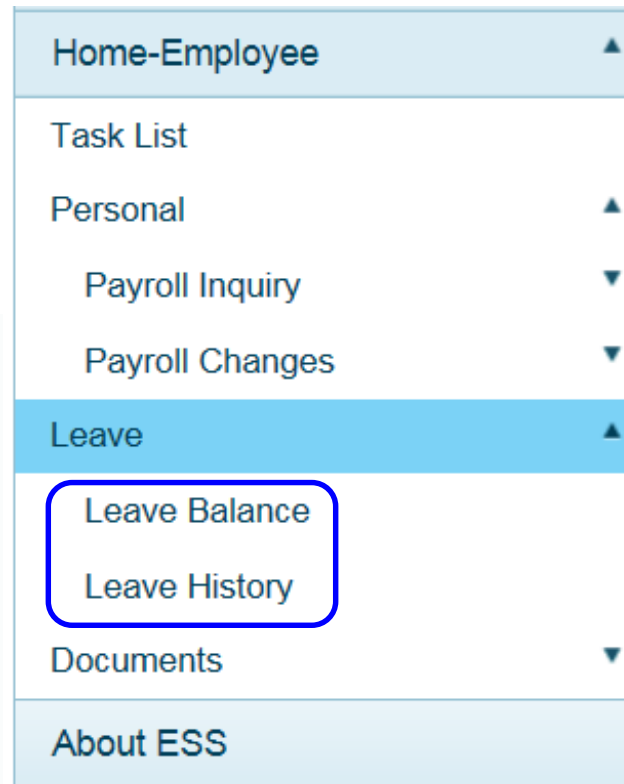
IRS instructions and worksheet are accessible from W4 form.

If requesting a change for W4, the employee must enter **ALL** information on the W4 form, not just the change.

Electronic signature and date must be exactly as displayed – no extra spaces, dashes or periods.

# *Employee Self Service – Leave*

Leave Menu allows the employee to see their leave history and leave balances.



# Employee Self Service – Leave Balance

Employee can view and print their current leave balances. The leave earned and used are reflective of the last completed payroll.

## Leave Balance Summary - 2016

[Back](#)[Print](#)

### User Instructions

Leave balances are reflective of the last payroll processed and updated. Please review your leave balances after you receive your check or statement.

Description	Hrs/Days	Accum. Rate	Prior Yr. Bal.	Current Earned	YTD Used	Balance
1 - SICK - CENTRAL OFFICE	D	12	264	11	17	258
2 - PERSONAL - CENTRAL OFFICE	D	5	0	5	0	5
3 - VACATION - CENTRAL OFFICE	D	10	18.5	10	5.5	23
SB - SICK BANK - CENTRAL OFFICE	D	999	5	0	0	5

# Employee Self Service – Leave History






Employee can view and print their detail leave history for a specific date range.

## Leave History

[Back](#)[Print](#)

Start Date   End Date  

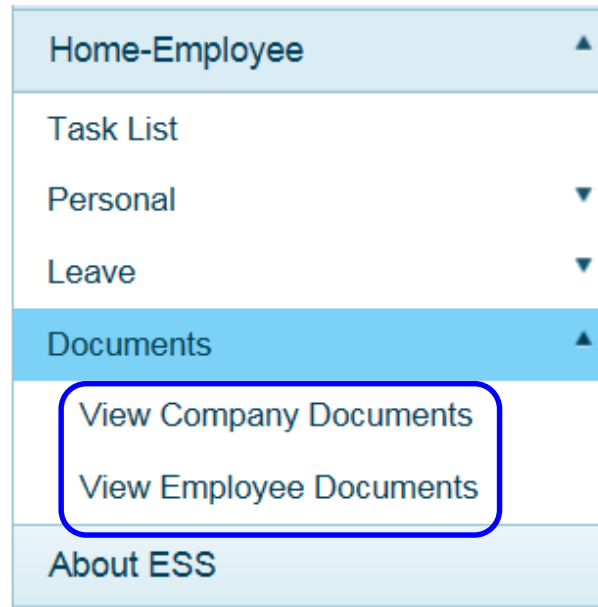
Payroll Date	Hrs/Days	Description	Used
01/12/2015	D	PROFESSIONAL	1.00
01/16/2015	D	SICK	1.00
03/05/2015	D	SICK	1.00
03/20/2015	D	SICK	1.00
03/26/2015	D	SICK	1.00
04/20/2015	D	SICK	0.50
04/23/2015	D	SICK	1.00
05/07/2015	D	PERSONAL	1.00
05/08/2015	D	PERSONAL	1.00
05/15/2015	D	VACATION	1.00
05/21/2015	D	SICK	0.50
05/22/2015	D	SICK	1.00
06/05/2015	D	VACATION	1.00



1 - 13 of 13 items

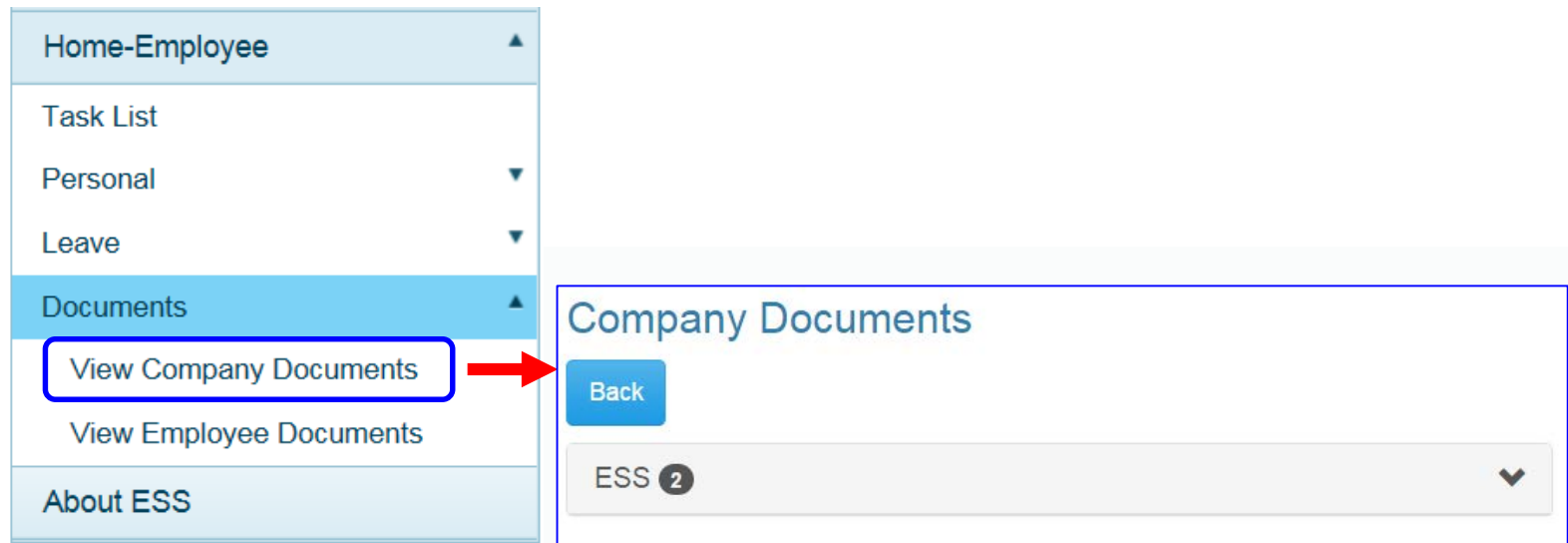
# *Employee Self Service–Documents*

Documents menu allows the employee to view company documents or the employee's personal documents.



# Employee Self Service–View Company Documents

View Company Documents allows employees view and print any documents uploaded by the Document Administrator. This is a great way to give employee access to Policy and Procedure Manuals, retirement documents, and Open Enrollment documents.



# Employee Self Service–View Company Documents

Employee can view and print documents that their District has placed in Company Documents by clicking the category and selecting the document.

## Company Documents

Back

EmployeeHirePackage 1

Policy Manual

EmployeeNewHirePackage 1

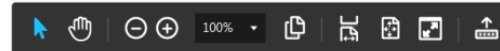
new employee 1

new policy 1

retirement information 1

**HARRIS**

### Employee Policy and Procedures Handbook





# Employee Self Service–View Employee Documents

Employee can view and print their detail check, W2, Truth In Salary or 1095C forms if these documents are available.

Home-Employee ▲

Task List

Personal ▼

Leave ▼

Documents ▲

View Company Documents

View Employee Documents

About ESS

Employee Documents

Checks ▼

Checks

W2

Truth in Salary

1095C

Document	Document Type	Document Date
----------	---------------	---------------

# Employee Self Service–View Employee Documents

Employee can view and print their detail check information by selecting checks from drop down and pressing the search button. A list of all the employee check/statements will be displayed. Employee will then click on the check/statement to view and the check will open in a separate browser tab. The check/statement can then be printed or saved. Each tab that is opened with detail records must be closed manually when logging out of ESS.

## Employee Documents

Checks

Search

### Document

- 127566
- 128078
- 128591
- 283
- 648
- 1016
- 1386
- 1756
- 2132
- 2508
- 2883

### Document Type

- Check
- Check
- Check
- Check
- Check
- Check

### Document Date

- 8/27/2013 11:20:14 AM
- 9/24/2013 1:53:20 PM
- 10/29/2013 2:44:58 PM
- 11/20/2013 10:33:29 AM
- 12/17/2013 2:27:14 PM
- 1/27/2014 10:39:29 AM



EMPLOYEE NAME		EMPLOYEE NUMBER	PAY PERIOD END	CHECK DATE	CHECK NUMBER	
INSTRUCTION TEACHER			03/30/2014	04/30/2014	2132	
DESCRIPTION	CURRENT AMOUNT	DESCRIPTION	CURRENT AMOUNT	YTD AMOUNT		
1 2-D WHITAK	259.18	1 012.72				
2 FNU	283.75	1 135.04				
3 SWN	154.16	616.64				
4 RETIREMENT	305.00	1 300.00				
20 AVOTEACTIV	3.60	14.40				
21 AGA DUES	18.20	72.80				
27 AMER FAM L	71.50	286.00				
58 AGA C DUES	24.00	96.00				
63 M/C WHITAK	59.21	236.84				
424 PERIF	222.00	888.00				
427 AMER FAM L	30.42	121.68				
909 FIRST STAT	2,899.77	11,362.08				
GROSS PAY	6,516.00	17,344.00				
PRIME BENEFIT	0.00	0.00				
LEAVE DESCRIPTION	BALANCE	TAKEN				
SICK	10.00	6.00				
PERSONAL	4.00	1.00				
SICK BANK	5.00	0.00				
		NET PAY			0.00	
		Board of Education			2132	
		Payroll Account				
		PAY *****VOID*****VOID** DIRECT DEPOSIT *****VOID*****VOID*****VOID*****				
		TO THE ORDER OF				
		CHECK DATE	CHECK NO.	AMOUNT		
		04/30/2014	2132	0.00		

# Employee Self Service–View Employee Documents

Employee can view and print their W2 records by selecting W2 from drop down and pressing the search button. A list of all the employee W2s by year will be displayed. Employee will click on the W2 to view the detail record. The document will open in a separate browser tab. The W2 can then be printed or saved. Each tab that is opened with detail records must be closed manually when logging out of ESS.

## Employee Documents

W2

Search

### Document

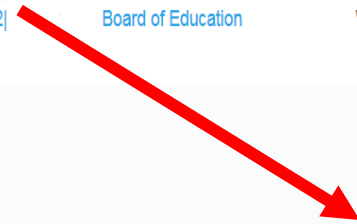
- 2013 W2,  
2014 W2
- Board of Education  
Board of Education

### Document Type

- W2  
W2

### Document Date

- 2/6/2014 9:52:35 AM  
1/19/2015 12:27:50 PM



Copy B-To Be Filed With Employee						38-2099003 OMB No. 1545-0008						Copy 2-To Be Filed With Employee State						38-2099003 OMB No. 1545-0008																																									
FEDERAL Tax Return												City or Local Income Tax Return																																															
a Employee soc. sec. no.						1 Wages, tips, other comp.						2 Federal income tax withheld						a Employee soc. sec. no.						1 Wages, tips, other comp.						2 Federal income tax withheld																													
						18,389.45						955.71												18,389.45						955.71																													
b Employer ID number (EIN)						3 Social security wages						4 Social security tax withheld						b Employer ID number (EIN)						3 Social security wages						4 Social security tax withheld																													
20,353.68						2,261.36						20,353.68						2,261.36						20,353.68						2,261.36																													
5 Medicare wages and tips						6 Medicare tax withheld						5 Medicare wages and tips						6 Medicare tax withheld						5 Medicare wages and tips						6 Medicare tax withheld																													
20,353.68						295.09						20,353.68						295.09						20,353.68						295.09																													
c Employer name, address, and ZIP code												c Employer name, address, and ZIP code												c Employer name, address, and ZIP code												c Employer name, address, and ZIP code																							
State County Board of Education																																																											
d Control Number												d Control Number												d Control Number												d Control Number																							
82												82												82												82																							
e Employee name, address, and ZIP code												e Employee name, address, and ZIP code												e Employee name, address, and ZIP code												e Employee name, address, and ZIP code																							
7 Social security tips						8 Allocated tips						9 Advance EIC payment						7 Social security tips						8 Allocated tips						9 Advance EIC payment						7 Social security tips						8 Allocated tips						9 Advance EIC payment											
10 Dependent care benefits						11 Nonqualified plans						12a Code See inst. for box 12						10 Dependent care benefits						11 Nonqualified plans						12a Code See inst. for box 12						10 Dependent care benefits						11 Nonqualified plans						12a Code See inst. for box 12											
												DD																		DD																													
13 Statutory Employee						14 Other						15 State wages, tips, etc.						13 Statutory Employee						14 Other						15 State wages, tips, etc.						13 Statutory Employee						14 Other						15 State wages, tips, etc.											
Retirement plan						CAF						1,836.00						Retirement plan						CAF						1,836.00						Retirement plan						CAF						1,836.00											
X						DUE						273.95						X						DUE						273.95						X						DUE						273.95											
Third-party sick pay												12b Code						Third-party sick pay												12b Code						Third-party sick pay												12b Code											
												G																		G																													
16 State Employer state ID number						17 State income tax						16 State Employer state ID number						17 State income tax						16 State Employer state ID number						17 State income tax						16 State Employer state ID number						17 State income tax																	
20,053.68						646.29						20,053.68						646.29						20,053.68						646.29						20,053.68						646.29																	
18 Local wages, tips, etc.						19 Local income tax						20 Locality name						18 Local wages, tips, etc.						19 Local income tax						20 Locality name						18 Local wages, tips, etc.						19 Local income tax						20 Locality name											
Form W-2 Wage and Tax Statement 2013 Dept. of the Treasury - IRS												Form W-2 Wage and Tax Statement 2013 Dept. of the Treasury - IRS												Form W-2 Wage and Tax Statement 2013 Dept. of the Treasury - IRS												Form W-2 Wage and Tax Statement 2013 Dept. of the Treasury - IRS																							
This information is being furnished to the Internal Revenue Service																																																											

# Employee Self Service–View Employee Documents

Employee can view and print their Truth In Salary documents by selecting Truth In Salary from drop down and pressing the search button. A list of all the employee's document by year will be displayed. Employee will click on the document to view the detail. The document will open in a separate browser tab. The document can then be printed or saved. Each tab that is opened with a detail record must be closed manually when logging out of ESS.

## Employee Documents

Truth In Salary ▾

Search

### Document

2015 Truth  
2016 Truth



### Document Type

Truth in Salary  
Truth in Salary

### Document Date

6/3/2016 10:30:34 AM  
1/10/2017 8:52:11 AM

#### TRS/PEEHIP Truth in Salary Act Information for Active Education Employees Fiscal Year 2016

Rpt Loc: 0095 -  
Pers Id:

Total Gross Wages for the Fiscal Year:	\$34,688.00
Total Social Security Benefits for Fiscal Year:	\$2,011.69
Total Medicare Benefits for Fiscal Year:	\$470.45
Total Retirement Benefits for Fiscal Year:	\$4,141.76
Total Health Insurance Benefits for Fiscal Year:	\$6,240.00
Total SUI Benefits for Fiscal Year:	\$3.44
Total Misc Benefits (ex: Life Ins) for Fiscal Year:	\$0.00
<b>Grand Total of Benefits for Fiscal Year:</b>	<b>\$47,555.34</b>

Total Leave Units Accrued for the Leave Year:	14.00
Total Comp Time Units Accrued for the Leave Year:	0.00
11-Month Employees, Eligible for Holidays, Accrued:	0
12-Month Employees, Eligible for Holidays, Accrued:	0

Average Annual Employer Subsidy for PEEHIP Coverage:  
Active Single: \$4,585.80  
Active Family: \$10,231.68

Total Amount of Employer Contributions to TRS: \$737,654.554

Percentage of TRS Employer Contributions  
Compared to the Total Amount of the Education Trust Fund Appropriations: 5.04%

The Funded Ratio of TRS as of Fiscal Year 2014: 67.5%

## Employee Documents

Search

2015 ACA1095C  
2016 ACA1095C

1095C

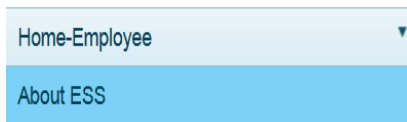
1095C

7/11/2016 3:46:56 PM  
1/9/2017 2:51:37 PM

[illegible]

# Employee Self Service – About ESS

The *About ESS* Menu option identifies the Product Version and the District. The District's contact information for Employee Self Service can also be displayed here.



## About Employee Self Service

[Back](#)[Print](#)

Customer: ! BOARD OF EDUCATION

Product Version: 2.15.2.27

Accounting System: NextGen

Accounting System Version: 2



If you have any questions or experience a problem with ABC School Districts ESS site, please contact us at 555.555.5555.

© N. Harris Computer Corporation 2017

# Employee Self Service – Manage Account

An employee can manage their ESS account by clicking on their user name in the toolbar.



## Manage Account.

You're logged in as **rsmith**.

[Change account](#)

[Back](#)

Employee clicks on their user name to manage their account.

## Change password

Current password

New password

Confirm new password

The employee can change their password by entering their current password and the new password.

## Employee Information

Employee Number

User Name

First Name

Last Name

Email

No Alert Emails

☐

The employee can change the name and email address associated with their ESS account.

The employee can choose not to receive email alerts for requests and approvals in ESS.