



SOUTH CAROLINA  
DEPARTMENT OF SOCIAL SERVICES  
Office of Child Support Enforcement  
P.O. Box 1469  
Columbia, South Carolina 29202-1469

Elizabeth G. Patterson, J.D.  
State Director

Dear Employer:

The Child Support Enforcement Division (CSED) of the Department of Social Services, in compliance with State and Federal Law, has developed the Employer New Hire Reporting Program. Through this program employers must report all newly hired and rehired employees. This information will be used to ensure that noncustodial parents live up to their financial responsibilities to their children. By working together, the CSED and employers can reduce the burden on our nation's taxpayers and provide a better life for our nation's children.

There are several methods available for employers to report newly hired and rehired employees: copy of W-4 form, New Hire Reporting Form, computer printouts, magnetic media, and the Internet. Enclosed you will find an Employer New Hire Reporting Brochure and a reporting form with an explanation of the reporting options. We would like to encourage you to utilize our newly developed web site to report your new hires. You may find our on-line reporting web site at [www.scnewhire.com](http://www.scnewhire.com).

If you have any questions about the Employer New Hire Reporting Program, you may call our toll-free number at 1-888-454-5294 or call 898-9235 in the Columbia area. You may also write to the attention of the Employer New Hire Reporting Program at the address above. Additionally, we have developed an informative web site which you may visit at [www.state.sc.us/dss/csed](http://www.state.sc.us/dss/csed).

With your commitment and cooperation, we can make a positive difference in the lives of our nation's children. I thank you in advance for your participation in the Employer New Hire Reporting Program.

Sincerely,

A handwritten signature in cursive script that reads "Larry J. McKeown". Below the signature is a horizontal line with the initials "cme" written at the end.

Larry J. McKeown, Director  
Child Support Enforcement Division

LJM:bhs

Enclosure: Employer New Hire Reporting Brochure  
Magnetic Reporting Instructions  
New Hire Reporting Form

# New Hire Reporting Instructions

If an employer chooses to report by paper or fax, the employer is required to report all newly hired or rehired employees within 20 days of the hiring. If an employer chooses to report by magnetic media or by electronic means, the employer is required to report newly hired or rehired employees twice a month. Multistate employers should see the Fact Sheet included in this packet, or call the Employer New Hire Reporting Program at 1-888-454-5294, for special reporting options and requirements.

The following data elements must be reported for each newly hired or rehired employee:

1. **Employer Name**
2. **Employer Address**
3. **Employer Federal Identification Number**
4. **Employer Phone Number (optional)**
5. **Employee Name**
6. **Employee Address**
7. **Employee Social Security Number**
8. **Employee Date of Birth (optional)**
9. **Employee Date of Hire (optional)**

## New Hire Reporting Methods

### **Tape and Diskette Reporting**

Details of tape and diskette reporting, including record layouts, are included in this packet. If you have additional questions, you may contact the Employer New Hire Reporting Program at 1-888-454-5294.

### **W-4 Form**

You may mail or fax a copy of the employee's W-4 Form to satisfy reporting requirements. Remember to include the employer's Federal Identification Number and address on each W-4 Form you submit.

### **Computer Printouts**

You may mail a computer printout that contains the employee information above to satisfy reporting requirements. You must include the employer's name, address, and Federal Identification Number on each page of the report.

### **Reporting Form**

You may use the form on the other side of this page to report newly hired and rehired employees. If you use this form, please remember to make and keep additional copies of the form for future reporting.

### **Electronic Reporting**

You may report newly hired and rehired employees via our web site at [www.scnewhire.com](http://www.scnewhire.com)

Tape, diskette, and paper reports should be sent to:

**South Carolina Department of Social Services  
Employer New Hire Reporting Program  
Post Office Box 1469  
Columbia, SC 29202-1469**

Paper reports may be faxed to: **(803) 898-9100 ATTN: Employer New Hire Reporting Program**

You may visit our informative web site at: **[www.state.sc.us/dss/csed](http://www.state.sc.us/dss/csed)**

***Please bear in mind that we receive reports in many different printed formats. Please make sure that all reports that you submit are legible and contain all required data elements.  
Thank for your cooperation in this matter.***

# South Carolina New Hire Reporting Form

Please refer to the New Hire Reporting Instructions on the back of this form. If you use this form to report newly hired or rehired employees, please make and keep additional copies for future reporting.

## EMPLOYER IDENTIFICATION:

Employer Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Employer Address: \_\_\_\_\_  
\_\_\_\_\_

Employer City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Federal Employer Identification Number: \_\_\_\_\_

## NEWLY HIRED OR REHIRED EMPLOYEE INFORMATION:

Employee Name		
Employee Address		
City	State	Zip
SSN	Date of Birth	Date of Hire

Employee Name		
Employee Address		
City	State	Zip
SSN	Date of Birth	Date of Hire

Employee Name		
Employee Address		
City	State	Zip
SSN	Date of Birth	Date of Hire

Employee Name		
Employee Address		
City	State	Zip
SSN	Date of Birth	Date of Hire

**MAIL OR FAX THIS REPORT TO:**

**Fax Number: (803) 898-9100**  
**www.scnewhire.com**

**South Carolina Department of Social Services**  
**New Hire Reporting Program**  
**Post Office Box 1469**  
**Columbia, SC 29202-1469**

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www.scnewhire.com

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**MAGNETIC MEDIA REPORTING FOR EMPLOYER NEW HIRE REPORTING PROGRAM**

This form provides information for reporting New Hire data on magnetic tape cartridges and IBM formatted diskettes. If there are additional questions, call the Employer New Hire Reporting Program at 1-888-454-5294. **PLEASE AFFIX AN EXTERNAL LABEL CONTAINING THE EMPLOYER NAME AND ADDRESS ON ANY CARTRIDGE OR DISKETTE SUBMITTED TO THE EMPLOYER NEW HIRE REPORTING PROGRAM.**

Mail cartridges or diskettes along with a copy of this form to the attention of the Employer New Hire Reporting Program at the address above.

Employer Name: \_\_\_\_\_

Employer Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Contact: \_\_\_\_\_ Phone: \_\_\_\_\_

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**Specifications for magnetic tape:**

Media: 3480/3490 Cartridge  
Data Set Name: DSSYY.NEWHIRE (preferred, but not required)  
Logical Record Length: 150 bytes (required)  
Block Size: 15000 bytes (required)  
IBM Standard Labels (required) EBCDIC Interchange Code (required)

**Specifications for magnetic diskette:**

Media: 3.5 inch floppy (720k bytes or 1.4M bytes)  
File Name: NEWHIRE.TXT (preferred, but not required)  
Record Length: 150 bytes (required)  
Interchange code: ASCII

**SEE REVERSE SIDE FOR LAYOUT INFORMATION**

# Record Layouts and Instructions

## Employer Record Layout

Location	Field	Length	Data	Remarks
1-9	Employer Federal ID	9	N	Do not suppress leading zeros. Required.
10-39	Employer Name	30	AN	Left justified. Required.
40-64	Employer Address Line 1	25	AN	Left justified. Required.
65-89	Employer Address Line 2	25	AN	Left justified, if present. Optional.
90-111	Employer City	22	AN	Left justified. Required.
112-113	Employer State	2	AN	Postal Abbreviation. Required.
114-122	Employer Zip	9	N	First 5 digits are required. No Dash.
123-132	Employer Phone	10	N	Area Code + Prefix + Suffix. No Dashes. Optional.
133-149	Filler	17		Blank spaces.
150	Record Identifier	1	AN	"R" is required to identify this record as an employer.

## Employee Record Layout

Location	Field	Length	Data	Remarks
1-9	Employee SSN	9	N	Do not suppress leading zeros. No dashes. Required.
10-24	Employee Last Name	15	AN	Left justified. Required.
25-44	Employee First Name	20	AN	Left justified. Required.
45	Employee Middle Initial	1	AN	Optional.
46-70	Employee Address Line 1	25	AN	Left justified. Required.
71-95	Employee Address Line 2	25	AN	Left justified, if present. Optional.
96-117	Employee City	22	AN	Left justified. Required.
118-119	Employee State	2	AN	Postal Abbreviation. Required.
120-128	Employee Zip	9	N	First 5 digits are required. No Dash.
129-136	Employee Date of Birth	8	N	YYYYMMDD format. No slashes or dashes. Optional.
137-144	Employee Date of Hire	8	N	YYYYMMDD format. No slashes or dashes. Optional.
145-149	Filler	5		Blank spaces.
150	Record Identifier.	1	AN	"E" is required to identify this record as an employee.

**A record set consists of one Employer Record followed by one or more Employee Records.**

### Tape Instructions:

You must submit your New Hire data, according to our record layout, on 3480/3490 Cartridge with the data set name and company name appearing on an external label affixed to the cartridge. You must use IBM standard labels with a record length of 150 bytes and fixed block size of 15000 bytes. Tape density must be 1600 BPI or 6250 BPI. The interchange code must be EBCDIC. Note: You may convert your EBCDIC file to an ASCII file and submit it through our web site at [www.scnewhire.com](http://www.scnewhire.com) .

If you are reporting for more than one employer, you may "stack" record sets on top of each other in the same file.

### Diskette Instructions:

In order for your data to be processed by our mainframe, you must submit your data according to our record layout in ASCII format. We can process only IBM formatted 3.5" floppy diskettes. Note: You may submit the file you prepare for Diskette Reporting through our Internet site at [www.scnewhire.com](http://www.scnewhire.com) .

When using word processing or spreadsheet software to compile the New Hire data, you must "Export" or "Save As..." your data to a Fixed Length ASCII file, with no spaces or special characters between fields of each record. Each record (employer record or employee record) in the record layout will be a single line of your ASCII file. The first line will be the employer record followed by each employee record listed on a separate line. If you are reporting for multiple employers, you may "stack" the record sets on top of each other in the same file.

**If you need any help with preparing your data on magnetic media, please call the New Hire Reporting Program at 1-888-454-5294 or visit our web site at [www.state.sc.us/dss/csed](http://www.state.sc.us/dss/csed) for detailed instructions and a sample file layout.**

## Employer New Hire Reporting Program **Fact Sheet**

New Hire information will be used to:

- Establish and enforce child support orders
- Detect Unemployment Benefits fraud
- Detect Workers' Compensation fraud
- Detect fraud in other government programs, such as Welfare and Food Stamps.

Penalties for failing to report newly hired or rehired employees:

- \$25 for the second offense and \$25 for each offense thereafter.
- \$500 for each and every offense, if the failure to report is the result of a conspiracy between the employer and the employee not to supply the required information or to supply false or incomplete information.

A company operating in more than one state has two reporting options:

- 1) Report each newly hired or rehired employee to the Employer New Hire Reporting Program in the state in which that employee works; or
- 2) Designate one State in which the company has employees and report ALL of its newly hired or rehired employees to that state's Employer New Hire Reporting Program by magnetic or electronic means.

If a multistate employer chooses option 2 above, that company must notify the Secretary of the US Department of Health and Human Services in writing of the choice to report to one state and identify the chosen state. This notification should be sent or faxed to:

Department of Health and Human Services  
Administration for Children and Families  
Office of Child Support Enforcement  
Multistate Employer Notification  
P.O. Box 509  
Randallstown, MD 21133

Fax Number: 1-410-277-9325

Multistate employers may also notify the Secretary of the US Department of Health and Human Services on-line at [www.acf.dhhs.gov/programs/cse/newhire/employ/emult.htm](http://www.acf.dhhs.gov/programs/cse/newhire/employ/emult.htm)