

Arizona New Hire Reporting Center

CSV file layout

Each record line of the file should represent one record.

Data record (one per new hire)

#	Field	Status	Type	Description
1	Record Identifier	Required	Char	"AZ Newhire Record"
2	Format Version Number	Required	Char	The following text: "CSV1"
3	Employee First Name	Required	Char	At least one character, no special characters.
4	Employee Middle Name	Optional	Char	If non-blank must be at least one character, no special characters.
5	Employee Last Name	Required	Char	At least one character, no special characters except hyphen.
6	Employee Name Suffix	Optional	Char	At least one character, no special characters except hyphen.
7	Employee SSN#	Required	Numeric	The suffix of employee name such as Jr, SR, and III
8	Employee Address Line 1	Required	Char	As reported by employee.
9	Employee Address Line 2	Optional	Char	At least two characters, left justify
10	Employee Address Line 3	Optional	Char	Left justify. Spaces if unused.
11	Employee City	Required	Char	Left justify. Spaces if unused.
12	Employee State	Required	Char	At least two characters, no special characters except hyphen.
13	Employee Postal Code	Required	Char	Valid state or territory abbreviation. Not required for foreign address.
14	Employee Zip+4	Optional	Numeric	If a non-foreign address then only U.S. 5 digit zip code, left justified.
15	Employee Country Code	Optional	Char	For foreign addresses only.
16	Employee Date of Birth	Optional	Numeric	If present, numeric. Format - MMDDYYYY
17	Employee Date of Hire	Required	Numeric	Required starting November 1, 2011. Format - MMDDYYYY
18	Employee State of Hire	Optional	Char	Valid state or territory abbreviation. Field is required for registered Multistate employers.
19	Is Medical Insurance Available to Employee?	Optional	Char	Y if medical insurance is available to employee, otherwise "N".
20	Employer Benefits include Medical?	Optional	Char	Y/N if company offers Medical Insurance.
21	Employer FEIN	Required	Numeric	Federal Employer Identification Number (no hyphens).
22	Employer Name	Required	Char	At least two characters.
23	Employer DBA	Optional	Char	Employer DBA, if different than Employer Name
24	Employer Address Line 1	Required	Char	At least two characters.
25	Employer Address Line 2	Optional	Char	Spaces if unused
26	Employer Address Line 3	Optional	Char	Spaces if unused
27	Employer City	Required	Char	At least two characters
28	Employer State	Required	Char	Valid state or territory abbreviation.

29	Employer Postal Code	Required	Char	U.S. 5 digit zip code
30	Employer Zip+4	Optional	Char	If present, must be 4-digits. Spaces if unknown or international address
31	Employer Country Code	Optional	Char	For foreign addresses only
32	Employer Phone Number	Optional	Numeric	Employer contact ten-digit phone number including area code (no hyphens or parentheses).
33	Employer Phone Extension	Optional	Numeric	Employer contact extension (numeric only).
34	Employer Contact Name	Optional	Char	Name of contact for employer.
35	Employer Multistate Indicator	Optional	Char	Y for Yes, reporting as a multi-state employer to IN or "N" for No
36	Employee Salary	Optional	Char	\$\$\$\$\$\$\$.cc (Use decimal point if including cents)
37	Employee Salary Frequency	Optional	Char	Please indicate the frequency that the Employee Salary (previous field) is paid to the employee. H=Hourly; B=Bi-Weekly; W=Weekly; S=Semi-Monthly; M=Monthly; Y=Yearly