



OHIO NEW HIRE REPORTING CENTER

Excel File Layout & Instructions

All required fields listed below must be included in the order provided.

Optional fields must be included but if no data is available leave the field blank.

The first row in the file must remain as it is provided in the template.

Provide one new hire per row in the Excel file.

Be careful when copying data in multiple cells so that it does not increment a number

(like a zip code, or street address) when it is supposed to be an exact copy of a cell.

See the Example Excel File and Excel Template on the File Upload page

Field	Type	Max Size	Status	Comments			
Record Type	Char	1	Required	Must be a '2'			
	Empl						
Employee SSN#	Numeric	9	Required	As reported by employee. For Independent Contractors, use SSN or FEIN.			
Employee First Name	Char	16	Required	At least one character, no special characters except hyphen.			
Employee Middle Name	Char	16	Optional	If non-blank must be at least one character, no special characters.			
Employee Last Name	Char	30	Required	At least one character, no special characters except hyphen.			
Employee Address Line 1	Char	40	Required	At least two characters.			
Employee Address Line 2	Char	40	Optional	Leave blank if unused.			
Employee Address Line 3	Char	40	Optional	Leave blank if unused.			
Employee City	Char	25	Required	At least two characters, no special characters except hyphen.			
Employee State	Char	2	Required	Valid state or territory abbreviation. Not required for foreign address.			
Employee Zip Code 1	Numeric	5	Required	Only U.S. 5 digit zip code. Not required for foreign address.			
Employee Zip Code 2	Numeric	4	Optional	Only U.S. 4 digit zip code extension.			
Employee Address: Foreign Country Code	Char	2	Optional	Required if foreign address.			
Employee Address: Foreign Country Name	Char	25	Optional	Required if foreign address.			
Employee Address: Foreign Postal Code	Char	15	Optional	Required if foreign address.			
Employee Date of Birth	Numeric	8	Required	Format - CCYYMMDD. Not required for Independent Contractors.			
Employee Date of Hire	Numeric	8	Required	Format - CCYYMMDD. Not required for Independent Contractors.			
Employee State of Hire	Char	2	Required	Valid state or territory abbreviation. Not required for foreign address.			
Employee Gender	Char	1	Optional	F=Female, M=Male, U=Unknown			
Employee Left Work	Char	1	Optional	Y=Yes, N=No, U=Unknown			
Employer & Independent Contractor Information							
Employer FEIN	Numeric	9	Required	Federal Employer Identification Number (no hyphens). Use the same FEIN for which listed employee(s) quarterly wages will be reported under.			
Employer Income Tax Credit	Char	1	Optional	Y=Yes, N=No, U=Unknown			
Employer State EIN	Char	12	Optional	No hyphens.			
Employer Name	Char	45	Required	At least two characters.			
Employer Address Line 1	Char	40	Required	At least two characters. Address for headquarters.			
Employer Address Line 2	Char	40	Optional	Leave blank if unused.			
Employer Address Line 3	Char	40	Optional	Leave blank if unused.			
Employer City	Char	25	Required	At least two characters, no special characters except hyphen.			
Employer State	Char	2	Required	Valid state or territory abbreviation. Not required for foreign address.			
Employer Zip Code 1	Numeric	5	Required	Only U.S. 5 digit zip code. Not required for foreign address.			
Employer Zip Code 2	Numeric	4	Optional	Only U.S. 4 digit zip code extension.			
Employer Address: Foreign Country Code	Char	2	Optional	Required if foreign address.			
Employer Address: Foreign Country Name	Char	25	Optional	Required if foreign address.			
Employer Address: Foreign Postal Code	Char	15	Optional	Required if foreign address.			

Field	Туре	Max Size	Status	Comments
Employer Income Withholding Address - Line 1	Char	40	Optional	Leave blank if unused. Address for child support garnishments.
Employer Income Withholding Address - Line 2	Char	40	Optional	Leave blank if unused.
Employer Income Withholding Address - Line 3	Char	40	Optional	Leave blank if unused.
Employer Income Withholding Address - City	Char	25	Optional	At least two characters.
Employer Income Withholding Address - State	Char	2	Optional	Valid state or territory abbreviation. Not required for foreign address.
Employer Income Withholding Address - Zip Code 1	Numeric	5	Optional	Only U.S. 5 digit zip code. Not required for foreign address.
Employer Income Withholding Address - Zip Code 2	Numeric	4	Optional	Only U.S 4 digit zip code extension.
Employer Income Withholding Add: Foreign Country Code	Char	2	Optional	Required if foreign address. Address for child support garnishments.
Employer Income Withholding Add: Foreign Country Name	Char	25	Optional	Required if foreign address.
Employer Income Withholding Add: Foreign Postal Code	Char	15	Optional	Required if foreign address.
Employee Independent Contractor	Char	1	Required for IC	Y=Yes, N=No, U=Unknown. Required 'Y' if the employee is an Independent Contractor (IC).
IC - Date Payments began	Numeric	8	Required for IC	Format - CCYYMMDD. Required if Independent Contractor (IC).
IC - Length of time contractor services performed	Numeric	2	Required for IC	In months. Required if Independent Contractor (IC).

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Phone: (888) 872-1490 | Fax: (888) 872-1611 | oh-newhire.com
The Ohio New Hire Reporting Center is a program in the Office of Child Support in the
Ohio Department of Job and Family Services. For more information, visit https://jfs.ohio.gov/ocs/