

# University of Arkansas Duplicate W-2 Order Form

Date \_\_\_\_\_

## INSTRUCTIONS

\* **Download Form**

\* Fill In Fields

\* Digitally Sign

\* Click Submit

\* **Attach a Copy of Government ID**

**NOTE:** You will need to create a digital  
signature to sign the form for the email.

OR

\* Print Form

\* Fill Out Form

\* **Include a Copy of Government ID**

\* Mail to Below Address:

University of Arkansas  
1125 W Maple St.  
ADMN 222  
Fayetteville, AR 72701  
ATTN: Payroll

Full Name \_\_\_\_\_

Emp-ID and/or Last 4 of SSN \_\_\_\_\_

Date of Birth \_\_\_\_\_

Phone Number \_\_\_\_\_

Mailing Address \_\_\_\_\_

City, State and Zip Code \_\_\_\_\_

Tax Year(s) Needed \_\_\_\_\_

Mail to the address above

or

Pick-Up at the University

Would you like us to update your address.      Yes      No

Signature \_\_\_\_\_

\* Please allow 2 to 3 business days for processing.