

REQUEST FOR DUPLICATE W-2 FORM:

Date:

Name:

SS#:

Address:

Telephone:

E-mail address:

Year W-2 requested for:

Department:

Title:

Signature:

Please submit this form to the Human Resources Office at Baruch College – CUNY, One Bernard Baruch Way, Box D-0202, New York, 10010 or fax your request to 646-660-6591.

Telephone requests will not be accepted. Processing this request will take four to seven business days upon receipt.

Please note: persons employed at more than one CUNY College will receive only one W-2 form, which will combine all tax-levy incomes.