

Duplicate Form W-2 Request

THIS FORM IS TO BE USED ONLY IF YOU ARE NO LONGER A STUDENT OR EMPLOYEE

A		o, go to https://controls on how to access and	ler.nd.edu/payroll-services/payroll-tax/ reprint your W-2.
MAIL TO	D: University of Notre Dame Payroll Services 724 Grace Hall Notre Dame, IN 46556		DATE OF REQUEST: EMAIL TO: payroll@nd.edu
FAX TO:	(574) 631-3138		
		PLEASE PRINT	
	sue a WAGE & TAX STATEMENT (EE NAME:		owing employee, for the 2023 tax year.
	NetID or ND ID #: SOCIAL SECURITY NUMBER: XXX - XX		
			(last four digits only)
Please check whether you would like your duplicate W-2 to be mailed or if you will pick it up.			
	IL MPLOYEE CURRENT MAILIN reet Address:		
Cit	ty:	State:	Zip Code:
PICK UP Phone Number: E-MAIL E-mail Address:			
Misp Socia Mail	er Received blaced or Destroyed al Security Number or Name Inc ing Address with HR or Registra er (Explain)	ar's Office is incorrec	ct
I understand of tax filing s			ry Friday beginning 2/9/2023 thru the end day to be included in that Friday's mailing.
Signature of W-2 Recipient:			

FOR PAYROLL DEPT. USE ONLY:

Date request rec'd: Processed by: