

ADP W2

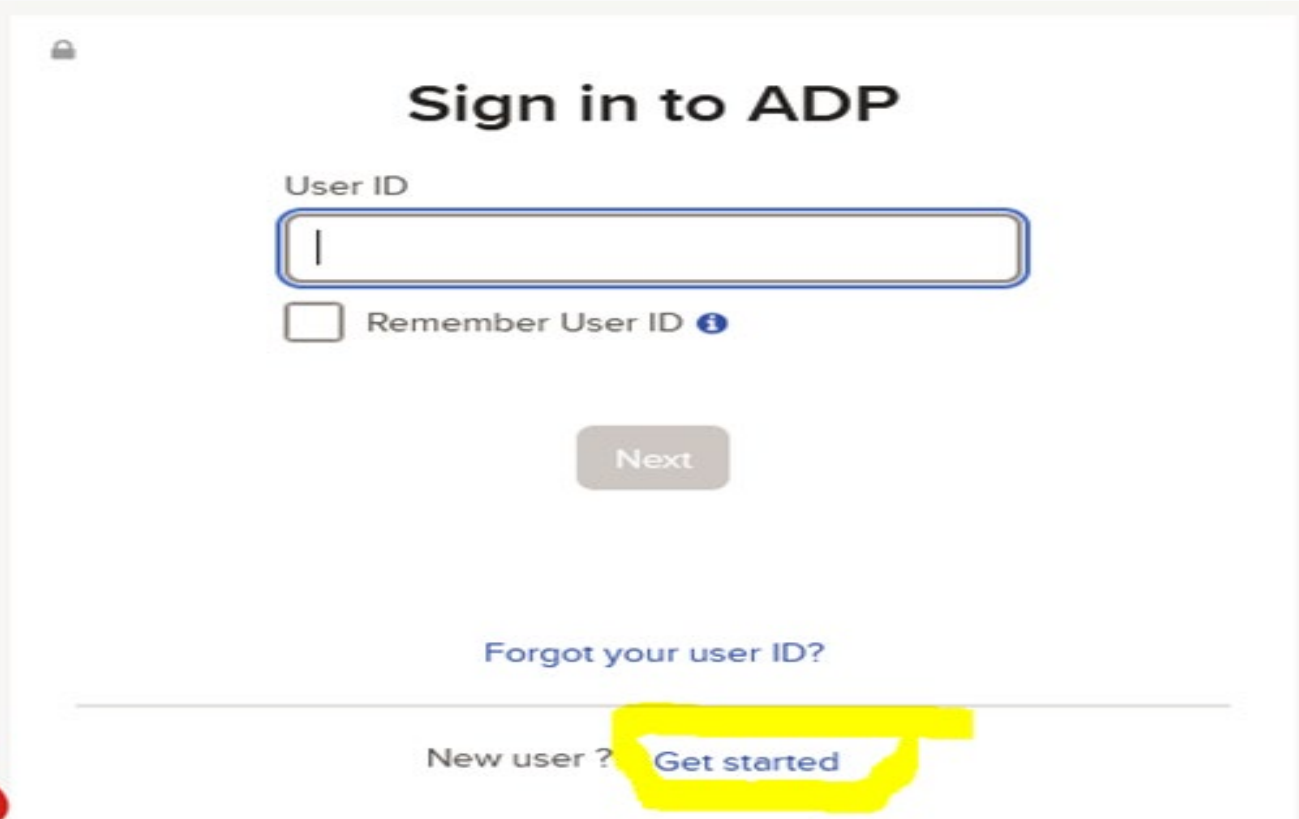
ONLINE REGISTRATION

INSTRUCTIONS

First time users will need to Create an Account at

<https://my.adp.com>

If you already have an Account Setup you may login.



Sign in to ADP

User ID

Remember User ID ⓘ

Next

[Forgot your user ID?](#)

New user? [Get started](#)

Click on [Get Started](#)



Create Your Account

Creating an online account gives you secure and quick access to your personal, pay, HR and company information. It's easy.

Please select an option to continue.

Find me

I have a registration code

Back



Enter Code

Identity Info

Contact Info

Create Account

Enter Registration Code

Registration Code

CCREEKSCH-W2

Continue

Back


COPY & PASTE REGISTRATION CODE




Identify yourself

First name* 


Last name* 

Service name and document* 

W2 Services 

[VIEW SAMPLE DOCUMENTS](#)

Year of W-2*

2022 

***PLEASE NOTE FOR YEAR OF W2, IT WILL DEFAULT TO CURRENT TAX YEAR. YOU MAY NEED TO PUT A PRIOR YEAR IF IT CAN'T FIND YOU.**

Control number - Employee ID*

Control number - Company code*

Zip Code*

Employee's SSA number*

Continue

COPY & PASTE COMPANY CODE
SOCIAL SECURITY NUMBER (JUST NUMBERS DO NOT PUT IN DASHES)
CLICK CONTINUE

****If the system does not find you, it means that some of your information does not match.**

Should you get locked out, wait an hour, and try again.

Please reach out to payroll@cherrycreekschools.org

Next, you will be asked questions to Verify Identity. These are multiple choice questions and only one answer is correct. This information is only used to verify identity, and not shared with your organization.

Employee will select a valid response to each question within 30 seconds. These questions and their answer choices are generated from public records and other commercially available data sources. The responses are not used for any purpose other than to verify your identity and are not shared with your organization.

After verifying identity, you will be directed to update your contact information.

After verifying your identity, you will be directed to update your information.

Help us protect your account

Primary Contact Information Enter a frequently used email and phone number to receive a verification code to confirm your identity and/or recover your account login information, when needed.

Email*

Personal

P I

Please check the format for your email address.

Phone*

Personal, Mobile

+1

[ADD BACKUP CONTACT INFORMATION](#)

CONTINUE

Click Continue

These contact sources will only be used to notify you when your W2 is posted to the website. You will be prompted to create a password.

×

One more step, Test!

Create your account with AVS Year-End Only Test

User ID: TUserLisa@AVSW2ONLY

Password (case sensitive) *

Confirm password (case sensitive) *

Accept Terms and Conditions

I have read and agree to the Employee Access Terms and Conditions.

CREATE YOUR ACCOUNT

Next, you will be asked questions to Verify Identity. **Once you have successfully completed this step, it will show your registration is complete. You may click the **MyADP** to login and view your W2's.**




Your registration is complete!

User ID: TUserLisa@AVSW2ONLY 

Sign-in to complete additional tasks
[MyADP](#) 

Activate your mobile phone within 24 hours by responding to the messages sent to you:

 +1 800-555-1215

Download ADP's free mobile app.



REQUEST FOR A COPY IRS FORM W-2

PLEASE PRINT

Please reissue a WAGE AND TAX STATEMENT (Form W-2) for the following employee, for the tax year ending _____.

EMPLOYEE NAME: _____

LAST FOUR DIGITS OF SOCIAL SECURITY NO.: _____

EMPLOYEE CURRENT MAILING ADDRESS: _____

Street Address, _____

City _____ State _____ Zip Code _____

***Please note: If Current Address does not match the address on file, you will be contacted to complete an Address Change Form.**

****W2 Requests can take up to 5 Business Day's to process.**

Please mail to: Home: _____ **Pick Up:** _____

W-2 FORM requested for the following reason:

_____ Never Received
_____ Misplaced or Destroyed
_____ Social Security Number or Name Incorrect
_____ Other (Explain). _____

Signature of Employee

Date

MAIL TO: Cherry Creek Schools
9150 E. Union Avenue
Greenwood Village, CO 80111

ATTN: Payroll Department

Email: payroll@cherrycreekschools.org

Fax: 720-554-4680

FOR PAYROIL DEPT. USE ONLY:

Date request rec'd: _____

Original W-2 re-mailed: _____

Processed by: _____

Duplicate W-2 reissued: _____