

University of Arkansas HMRS Duplicate W-2 Order Form

Date _____

Download this form then fill out the order form, digitally sign, save a copy for yourself and click the submit button to send by email. (You will need to create a digital signature to sign the form for the email.) If you do not have a university email address or do not have digital signature capability print the form out and mail to the address below.

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

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

Signature _____

* Please allow 2 to 3 business days for processing.