

# EMPLOYEE INFORMATION SHEET

The following personal data is requested to assist the University, Human Resources and Payroll with notifying you of general information, benefits updates, and University sponsored events. Information provided on this form is for University business purposes only. Please print.

Social Security Number: \_\_\_\_\_ J Number: \_\_\_\_\_

Family Salutation (ex. Mr. and Mrs. John Smith, III)

## Current Identification (Please print)

Prefix \_\_\_\_\_ First Name \_\_\_\_\_ Middle Name/Initial \_\_\_\_\_ Last Name \_\_\_\_\_ Suffix \_\_\_\_\_

## Address (Mailing/Campus) & Telephone

Home Street Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Home Phone: \_\_\_\_\_

Cell Phone: (\_\_\_\_) \_\_\_\_\_

(area code)

(used for University Emergency Notification system only)

## Department Information

Department \_\_\_\_\_ Bldg \_\_\_\_\_ Room \_\_\_\_\_ Phone \_\_\_\_\_

## Biographical

## Disability

Marital Status:  Single

## Veteran Status (Check applicable status)

Vietnam Era Vet  Disabled Vet  Other Eligible Vet

Armed Forces Service Medal Veteran Recipient

Newly Separated and Date of Separation: \_\_\_\_\_

## Emergency Contact

First Name \_\_\_\_\_ Middle Name/Initial \_\_\_\_\_ Last Name \_\_\_\_\_ Phone #'s \_\_\_\_\_

## Spousal Information

Prefix \_\_\_\_\_ First Name \_\_\_\_\_ Middle Name/Initial \_\_\_\_\_ Last Name \_\_\_\_\_ Suffix \_\_\_\_\_

## Education Completed

8<sup>th</sup> Grade \_\_\_\_\_ High School \_\_\_\_\_ Undergraduate \_\_\_\_\_ Graduate \_\_\_\_\_ Terminal Degree \_\_\_\_\_

Signature \_\_\_\_\_

Date \_\_\_\_\_

Revised 01/19/12