EMPLOYEE INFORMATION / DATA COLLECTION FORM

Social Security #:	**Name(Last, First, MI):**	**Birth Date:**

Suffix Name	**Gender:**	**Racial Identity:**
○ I ○ II ○ III ○ IV ○ V ○ Jr. ○ Sr. ○ None	☐ Female ☐ Male	☐ Not Reported ☐ Amer Indian / Alaska Nat ☐ Black/African American ☐ Asian/Pacific Islander ☐ Hispanic ☐ White

Citizenship/Visa Status:	**Citizenship Country:**	**Visa or Perm Res #:**	**Check Distribution:**

Military status (check one):	**Retired from State (check one):**	**Highest Education Level:**	Phone Directory (check one):
☐ Non-Veteran ☐ Veteran ☐ Vietnam Veteran ☐ Active Reserve ☐ Inactive Reserve Retired ☐ Special Disability	☐ Yes ☐ No	☐ Less Than 7th Grade ☐ 7th, 8th, 9th Grade Completed ☐ 10th, 11th Grade Completed ☐ High School Grad or GED ☐ Some Bus Coll Trade (HS Grad) ☐ Associate Degree Earned ☐ Bachelor's Degree Earned ☐ Some Graduate Study ☐ Advanced Grad Specialist (AGS) ☐ Master's Degree Earned ☐ Doctoral degree Earned ☐ First Professional Degree Earned	☐ All Information ☐ Blank ☐ No Permanent Address/Phone ☐ No Permanent Address ☐ No Permanent Phone

Business/Office Address: **Phone:**

Permanent Address: **County:** **State:** **Phone:**

Primary Email Address:

Employee Education Information

Institution/State/Country	**Degree**	**Discipline**	**Degree Earned (yyyy/mm):**	**Honorary (Y/N):**
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

Employee Previous Employment

Dates (from/to)	**Institution/Organization**	**Department**	**Title**
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____