

PERSONNEL DATA SHEET

New Employee
 Address Change
 *Name Change
 Other _____
*Social security card required

Personal Information

Last Name _____ First _____ Middle _____
 Prior Last Name _____ Salutation _____ Nickname _____
 Street Address _____ PO Box # _____
 City _____ State _____ Zip Code _____ County _____
 Social Security # _____ - _____ - _____ Birth Date _____
✓ the appropriate below to specify a primary contact # for emergency messages from Pfeiffer
 Home Phone # _____ Cell Phone # _____ Work Phone # _____
 Home Email _____ Work Email _____

<u>Gender</u>	<u>Marital Status</u>
<input type="checkbox"/> Male <input type="checkbox"/> Female	<input type="checkbox"/> Married <input type="checkbox"/> Single <input type="checkbox"/> Widowed <input type="checkbox"/> Divorced

Race/Ethnicity

A=Asian **B**= Black or African American **H**=Hispanic or Latino
 I=American Indian or Alaska Native **N**=Native Hawaiian or Other Pacific Islander
 U=Two or More Races (not Hispanic or Latino) **W**=White (non Hispanic)

Pfeiffer University is subject to certain governmental recordkeeping and reporting requirements for the administration of civil rights laws and regulations. In order to comply with these laws, Pfeiffer invites employees to voluntarily self-identify their race or ethnicity. Submission of this information is voluntary and refusal to provide it will not subject you to any adverse treatment. The information obtained will be kept confidential and may only be used in accordance with the provisions of applicable laws, executive orders, and regulations, including those that require the information to be summarized and reported to the federal government for civil rights enforcement. When reported, the data will not identify any specific individual.

Employment Eligibility

United States Citizen? Yes No, Citizen of _____

Military Status (if applicable)

Reserve/National Guard Special Disabled Vietnam Veteran
 Active Vietnam Era Veteran
 Inactive Special Disabled Veteran

Emergency Contact Information

1st Contact

Name _____ Relationship _____
 Address _____ City _____ State _____ Zip _____
 Home Phone # _____ Work Phone # _____ Cell # _____

2nd Contact

Name _____ Relationship _____
 Address _____ City _____ State _____ Zip _____
 Home Phone # _____ Work Phone # _____ Cell # _____

More info to complete on the reverse side of this form

PERSONNEL DATA SHEET

Position Information

Job Title _____

Hire Date _____

Status

Location

Full-time
 Part-time
 Adjunct
 Misenheimer
 Charlotte
 Triangle
 Satellite _____

Education

School Attended

Major

Degree Awarded

Years (ex.1999-2003)

GPA

_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

--	--

Employee Signature

Date