



Human Resources Employee Data Form

Revised 01/27/2017

New Employee Update Existing Data

Print name as it appears on social security card.

First Name _____

Middle Name _____

Last Name _____

Address _____

City, ST, Zip _____

Email _____

Primary Phone () _____

Cell Home Other

New Employee-list
Social Security No. _____

DSC ID _____

Gender Female Male

Date of Birth _____

Birth City, ST _____

Birth Country _____

Name Change-list
previous name _____

Demographics

Citizenship

- U.S. Citizen
- Permanent Resident
- Non-Resident Alien
- Student Visa

U.S. Military Status

- No Military Service
- National Guard
- Reservist
- Veteran Service before 9/11/01
- Veteran Service 9/11/01 or later

Highest Education Completed

- Less than High School
- High School Graduate/GED
- Some College
- Technical School
- 2-Year College Degree
- Bachelor's Degree
- Master's Degree
- Doctorate

Marital Status

- Civil Partnership
- Common Law
- Divorced
- Married
- Separated
- Single
- Widowed

Ethnicity

- American Indian/Alaska Native
- Asian
- Black/African American
- Hispanic/Latino
- Native Hawaiian/Other Pacific Islander
- White
- Prefer Not To Answer

Emergency Contact

First Name _____

Last Name _____

Relationship _____

Address Same as Above

Address _____

City, ST, Zip _____

Primary Phone _____

() _____

Cell Home Other

Secondary Phone _____

() _____

Cell Home Other

Authorization

Employee Signature

Date