

EMPLOYEE INFORMATION

Prefix: Dr. Name: _____
 Mr. (Last) (First) (Middle)
 Ms.
 Miss Social Security Number: _____ Hire Date: _____
 Mrs.

Mailing Address:
Street: _____
City: _____ County: _____
State: _____ Zip Code: _____

Email Address _____

Phone Numbers/Emergency Contacts:
Home Phone: _____ Cell Phone: _____
Emergency Contact: _____ Emergency Contact's Phone #: _____
Relationship _____

Gender: Male Female
Marital Status: Single Married, date: _____

Are you a full-time student? Yes No

Birth Date: _____ Birth Country: _____
Birth City: _____ Birth State: _____

Job Information: Position Title: _____
Department: _____ Start Date: _____

Are you actively participating in Teacher Retirement System (TRS) or Employee Retiree System (ERS)?
 Yes – TRS Yes – ERS No
If yes, where _____ Are you vested? Yes No
Are you retired under TRS or ERS? Yes – TRS Yes – ERS No
If yes, where _____

EEO Reporting

Highest Level of Education:

- | | |
|--|---|
| <input type="checkbox"/> Less than High School | <input type="checkbox"/> Master's Degree |
| <input type="checkbox"/> High School Diploma/GED | <input type="checkbox"/> Ed. Spec. Degree |
| <input type="checkbox"/> Associate's Degree | <input type="checkbox"/> Doctorate Degree |
| <input type="checkbox"/> Bachelor's Degree | <input type="checkbox"/> MD, DDS, JD |

Referral Source:

- | | |
|--|--|
| <input type="checkbox"/> Advertisement (Publication _____) | <input type="checkbox"/> Executive Search (Firm _____) |
| <input type="checkbox"/> Agency (Agency Name _____) | <input type="checkbox"/> Former Employee |
| <input type="checkbox"/> Applicant Clearinghouse | <input type="checkbox"/> Internet (Site _____) |
| <input type="checkbox"/> Client Referral | <input type="checkbox"/> Job Fair |
| <input type="checkbox"/> College Recruiting | <input type="checkbox"/> Job Posting (Location _____) |
| <input type="checkbox"/> Employee Referral | <input type="checkbox"/> Open House |
| <input type="checkbox"/> Phone Inquiry | <input type="checkbox"/> Other _____ |

Military Status:

- | | |
|--|--|
| <input type="checkbox"/> Active Reserve | <input type="checkbox"/> Retired Military |
| <input type="checkbox"/> Inactive Reserve | <input type="checkbox"/> Vietnam Era Veteran |
| <input type="checkbox"/> No Military Service | <input type="checkbox"/> Other Veteran |

ETHNIC SELF-IDENTIFICATION – Select One (categories established by federal OMB/Census Bureau guidelines)	
<input type="checkbox"/> Hispanic or Latino	A PERSON OF CUBAN, MEXICAN, PUERTO RICAN, SOUTH OR CENTRAL AMERICAN, OR OTHER SPANISH CULTURE OR ORIGIN, REGARDLESS OF RACE
<input type="checkbox"/> Not Hispanic or Latino	
RACIAL SELF-IDENTIFICATION – Select all that apply (categories established by federal OMB/Census Bureau and State of Georgia guidelines)	
<input type="checkbox"/> American Indian or Alaska Native	A PERSON HAVING ORIGINS IN ANY OF THE ORIGINAL PEOPLES OF NORTH AND SOUTH AMERICA (INCLUDING CENTRAL AMERICA), AND WHO MAINTAINS TRIBAL AFFLIATION OR COMMUNITY ATTACHMENT.
<input type="checkbox"/> Asian	A PERSON HAVING ORIGINS IN ANY OF THE ORIGINAL PEOPLES OF THE FAR EAST, SOUTHEAST ASIA, OR THE INDIAN SUBCONTINENT INCLUDING, FOR EXAMPLE, CAMBODIA, CHINA, INDIA, JAPAN, KOREA, MALAYSIA, PAKISTAN, THE PHILIPPINE ISLANDS, THAILAND, AND VIETNAM.
<input type="checkbox"/> Black or African-American	A PERSON HAVING ORIGINS IN ANY OF THE BLACK RACIAL GROUPS OF AFRICA.
<input type="checkbox"/> Native Hawaiian or other Pacific Islander	A PERSON HAVING ORIGINS IN ANY OF THE ORIGINAL PEOPLES OF HAWAII, GUAM, SOMOA, OR OTHER PACIFIC ISLANDS.
<input type="checkbox"/> White	A PERSON HAVING ORIGINS IN ANY OF THE ORIGINAL PEOPLES OF EUROPE, THE MIDDLE EAST OR NORTH AFRICA.

Citizenship Status:

- | | |
|--|--------------------------------------|
| <input type="checkbox"/> Alien-Permanent Resident | <input type="checkbox"/> Native |
| <input type="checkbox"/> Alien-Temporary Visa (Type _____) | <input type="checkbox"/> Naturalized |

** For office use only*

Employment Eligibility:

1. _____
2. _____

Background Check