



EMPLOYEE DATA FORM		
Administration C	IVIL SERVICE FACULTY EXTRA HELP	TEMP. ADMIN. GRAD ASSISTANT NON STUDENT TUTOR
Last Name:	First Name:	Social Security MI: Number:
Home Phone:	Cell Phone:	Email:
Address: City/State/Zip:		
Date of Birth:	Citizenship: N	Native Born Naturalized Not U.S. Citizen
Citizenship Country:	Type of Visa/Authorization:	Effective Date:
Gender: Male	Female Marital Status: Sing	le Married Name of Spouse:
Disability Status: Do you have a disability?* Yes No Are there any accommodations that you will require?		
*An impairment which substantially limits one or more of such person's major life activities, one who has a record of such impairment, or one who is regarded as having such an impairment. If yes and your require accommodations to do the essential functions of your job, you should notify either your immediate supervisor or the Office of Human Resources.		
Ethnic Identification: Please Select One Hispanic or Latino: A person of Cuban, Mexican Puerto Rican, South or Central American, or other Spanish culture or origin, regardless of race. Not Hispanic or Latino		
Racial Identification: Select one or more 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 affiliation or community attachment.		
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.	
Black or African American	A person having origins in any of the black racial groups of Africa. Terms such as "Haitian" or "Negro" can be used in addition to "Black or African American."	
Native Hawaiian or Other pacific Islander White	A person having origins in any of the original peoples of Hawaii, Guam, Samoa, or other Pacific Islands. A person having origins in any of the original peoples of Europe, the Middle East, or North Africa.	
Emergency Contact:		
Name:		Relationship:
Address:		Phone:
Pre Employment/Employment Statement: Have you ever been convicted of a crime? Yes No		
I understand that my employment with Chicago State University requires an investigation of my background including, but not limited to, a criminal record search and/or resume/vita verification. I fully understand that if any relevant negative history is exposed, my employment will be terminated. The above may be verified by a finger print check.		
	Signature	Date