PERSONNEL FILE MAINTENANCE

Southwestern University

SU Work Department: _____

Computer Preference (**New Tenure, Tenure-Track Faculty Only**):
PC _____   MAC _____   No Preference _____

NAME: _____ **SOCIAL SECURITY #**: _____
        (Last)   (First)   (Middle)

PREFIX: Mr.☐   Mrs.☐   Ms.☐   Dr.☐   Other ☐ _____   **SUFFIX**: Jr.☐   Sr.☐   Other ☐ _____

STREET ADDRESS: _____ **CITY**: _____

STATE: _____ **ZIP CODE**: _____ **E-MAIL ADDRESS**: _____

PHONE: (_____)_____ **BIRTH DATE**: _____ **GENDER**:   Male ☐   Female ☐

ETHNICITY: Do you consider yourself to be Hispanic/Latino?   ☐ Yes   ☐ No

RACE: In addition, select one or more of the following racial categories to describe yourself.

Black or African American ☐   Asian ☐   White ☐

American Indian or Alaskan Native ☐   Native Hawaiian or Other Pacific Islander ☐

ARE YOU A VETERAN OR MEMBER OF THE U.S.ARMED FORCES?   ☐ Yes
                                                           ☐ No

IF SO, PLEASE LIST YOUR BRANCH AND STATUS:_____

MARITAL STATUS: Married ☐   Single ☐

SPOUSE/PARTNER NAME: _____ **SPOUSE/PARTNER BIRTH DATE**: _____
                        First name   Last name

EMERGENCY CONTACT (NAME): _____

EMERGENCY PHONE: (_____)_____   (_____)_____
                      Day   Evening

DO YOU WISH TO DISCLOSE A DISABILITY THAT MAY REQUIRE AN ACCOMMODATION NOW OR IN THE FUTURE?   ☐ Yes   ☐ No
 IF YES, PLEASE EXPLAIN:
_____

Education	Name of School	Graduate? Year	Degree Type (ex. BA, BS, MA, MS)
High School			-----------------
GED			-----------------
Associate's Degree			
Bachelor's Degree			
Master's Degree			
Doctorate/Other Terminal Degree			
Specialized Degree(s)/Certifications			