

PERSONNEL RECORD SURVEY FORM

Datatel ID # _____

(For HR Office Use)

PERSONAL INFORMATION							
Prefix Ms Mrs Mr Dr	Legal First Name			Legal Last Name			
Date of Birth	Preferred First Name (if other than above)			I aiden Name (If applicable)			
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Social Security Number	Marital Status			Religious Affiliation (Optional)			
Street Address	Apt.	City	State Zip				
Current E-mail Address							
Primary Phone	dary Phone		☐ Home ☐ Cell ☐ Work	Legal Gender ☐ Female ☐ Male	Gender Identity		
□ Work □ Work □ Male Earned Degrees (If applicable) Institutions Where Degree Was Earned (If applicable)							
For reporting purposes only, please answer both questions listed below:							
Are you Hispanic or Latino?							
Which of these best describes your background? (Choose one or more)							
☐ American Indian/Alaska Native ☐ Asian ☐ Black/African American ☐ Native Hawaiian/Other Pacific Islander ☐ White							
Current Military Service			Veterans Status (Please reference list on back of form)				
EMERGENCY CONTACT INFORMATION							
Name		Relationship			Phone		
Name			Relationship			Phone	
POSITION INFORMATION/ ASSOCIATION TO THE UNIVERSITY							
Title or Position	Department/ Company	Department/ Company if other than Capital University			Start Date		
Relationship to the University	Building	uilding			CU Supervisor/ Point of Contact		

Revised: July 12, 2017

Veteran Status List:

- Not a veteran
- Disabled Veteran
- Disabled Vietnam and other Protected Veterans
- Newly Separated Veteran
- Newly Separated and Disabled
- Newly Separated and Other Protected
- Newly Separated, Disabled and Other Protected
- Other Protected Veteran
- Veteran (not used for legislative reporting)
- Vietnam Veteran
- Vietnam Veteran, Newly Separated
- Vietnam Veteran, Newly Separated and Disabled
- Vietnam Veteran, Newly Separated and Other Protected
- Vietnam Veteran, Newly Separated, Disabled and Other Protected
- Vietnam and Other Protected Veteran

Revised: July 12, 2017