



Employee Personal Data Information (Faculty)

Employee Legal Name: Legal name as it appears on your Social Security Card				
Last Name:	First Name:	Middle Name:	SMU ID#:	
Preferred Name:				
Last Name:	First Name:	Middle Name:		
Date of Birth:	Sex: <input type="checkbox"/> Male <input type="checkbox"/> Female	Marital Status: <input type="checkbox"/> Single <input type="checkbox"/> Married	Social Security Number:	
Highest Education Level:				
<input type="checkbox"/> Bachelor's Level Degree <input type="checkbox"/> Master's Level Degree <input type="checkbox"/> Doctorate (Academic) <input type="checkbox"/> Doctorate (Professional) <input type="checkbox"/> Other				
Degree	Institution	Location	Year Received	Major
Home Address:				
Number and Street:	City:	State:	Zip Code:	
Campus Address:				
Department Name:	Building Name & Room Number:	PO Box:		
Phone Numbers:				
Home:	Cell:	Business:		
Emergency Contact Information:				
Name:	Relationship:	Phone Number:		
Citizen Status: <input type="checkbox"/> U.S. Citizen <input type="checkbox"/> Permanent Resident <input type="checkbox"/> Non-Resident Alien	Country of Citizenship:	Visa Information (if applicable): <input type="checkbox"/> F-1 <input type="checkbox"/> J-1 <input type="checkbox"/> H-1 <input type="checkbox"/> Other _____		

Employee Personal Data Information (Faculty)

Race/Ethnicity:

Do you consider yourself to be Hispanic/Latino(a)? Yes No

Hispanic or Latino: A person of Cuban, Mexican, Puerto Rican, South or Central American, or other Spanish culture or origin, regardless of race.

In addition, select one or more of the following racial categories to describe yourself. If, you select two or more racial categories, please select one as primary.

Racial Categories	Primary	Definition
<input type="checkbox"/> American Indian or Alaska Native	<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 affiliation or community attachment.
<input type="checkbox"/> Asian	<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	<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 Pacific Islander	<input type="checkbox"/>	Native Hawaiian or Other Pacific Islander: A person having origins in any of the original peoples of Hawaii, Guam, Samoa, or other Pacific Islands.
<input type="checkbox"/> White	<input type="checkbox"/>	White: A person having origins in any of the original peoples of Europe, the Middle East, or North Africa.

Disability and Veteran Status:

SMU is an equal opportunity and affirmative action employer. This confidential information is voluntary and requested for Federal reporting purposes. To request a reasonable accommodation on the basis of a disability, please contact the Office of Institutional Access and Equity located in Perkins Administration Building 204 (www.smu.edu/aa).

Individual with a Disability

Individual with a Disability – An individual with a disability is person who has a physical or mental impairment that substantially limits a major life activity, has a record of such an impairment, or is regarded as having such an impairment.

Veteran Status: (Please select all that apply)

<input type="checkbox"/> Armed Forces Service Medal Veteran	Armed Forces Service Medal Veteran: Any veteran who, while serving on active duty in the U.S. military, ground, naval, or air service, participated in a United States military operation for which an Armed Forces service medal was awarded pursuant to Executive Order 12985 (61 FR 1209).
<input type="checkbox"/> Disabled Veteran	Disabled Veteran: A veteran of the U.S. military, ground, naval, or air service, who is entitled to compensation (or who but for the receipt of military retired pay would be entitled to compensation) under laws administered by the Secretary of the Veterans Affairs, or a person who was discharged or released from active duty because of a service-connected disability.
<input type="checkbox"/> Other Protected Veteran	Other Protected Veteran: A veteran who served on active duty in the U.S. military, ground, naval, or air service during a war or in a campaign or expedition for which a campaign badge has been authorized, under the laws administered by the Department of Defense.
<input type="checkbox"/> Recently Separated Veteran (Date of military discharge: ___/___/____)	Recently Separated Veteran: Any veteran during the three-year period beginning on the date of such veteran's discharge or release from active duty in the U.S. military, ground, naval or air service.

I certify that statements I have made in this employee personal data information form are true, complete and correct to the best of my knowledge and belief.

Signature

Date