

MERCER UNIVERSITY Personnel Data

Please print information. Refer to back for appropriate codes/definitions where applicable (*).

EMPLOYEE NAME (Last, First, Middle)			ETHNICITY / * RACE				
STREET ADDRESS			1) Are you Hispanic/Latino? <input type="checkbox"/> Yes, I am of Hispanic/Latino Origin (Includes all persons of Cuban, Mexican, Puerto Rican, South or Central American, or other Spanish culture or origin, regardless of race.) <input type="checkbox"/> No, I am not of Hispanic/Latino Origin				
CITY AND STATE						2) Regardless of your answer to the prior question, please check one or more of the following groups in which you consider yourself to be a member (definitions on back): <input type="checkbox"/> American Indian/Alaska Native <input type="checkbox"/> Native Hawaiian or other Pacific Islander <input type="checkbox"/> Asian <input type="checkbox"/> Black or African American <input type="checkbox"/> White	
ZIP CODE		PHONE			CAMPUS LOCATION		
SOCIAL SECURITY NUMBER	DATE OF BIRTH	SEX	<input type="checkbox"/> Atlanta <input type="checkbox"/> Macon <input type="checkbox"/> MERC <input type="checkbox"/> Savannah <input type="checkbox"/> Douglas Co. RAC <input type="checkbox"/> Eastman RAC <input type="checkbox"/> Henry Co. RAC <input type="checkbox"/> Other : _____				
Home: () Cell: () [Required for emergency preparedness plan.] I wish to receive text messages regarding campus alerts. <input type="checkbox"/> Yes <input type="checkbox"/> No						POSITION / TITLE	

EMERGENCY CONTACT NAME	* RELATIONSHIP CODE	EMERG CONTACT PHONE	EMERG CONTACT ALT PHONE
		()	()

* VETERAN STATUS	DEPARTMENT OF DEFENSE [For MERC Employees Only]
1) Are you a Veteran? <input type="checkbox"/> Yes <input type="checkbox"/> No 2) If yes, check any of the following that apply (definitions on back): <input type="checkbox"/> Armed Forces Service Medal Veteran <input type="checkbox"/> Recently Separated Veteran <input type="checkbox"/> Disabled Veteran <input type="checkbox"/> Other Protected Veteran: War/Campaign/Expedition _____ 3) Most recent discharge/release date: Mo _____ Day _____ Yr _____	Have you ever worked for the Department of Defense? <input type="checkbox"/> YES <input type="checkbox"/> NO If yes, were you a GS-13 or above, or if military, pay grade 04 or above? _____ List last dates of employment with a DOD agency. From _____ To _____

DEGREES	YEAR	MAJOR FIELD	INSTITUTION	COUNTRY

TECHNICAL TRAINING OR CERTIFICATION	LICENSING REQUIREMENTS / RENEWAL DATE

I CERTIFY THAT THE ABOVE INFORMATION IS CORRECT AND COMPLETE.

(SIGNATURE)

(DATE)

IF MORE SPACE IS NEEDED, PLEASE ATTACH ADDITIONAL SHEET.

(Rev. 5/2010)

DEFINITIONS FOR RACE

American Indian/Alaska Native: Includes all persons having origins in any of the original peoples of North and South America (including Central America), and who maintain a tribal affiliation or community attachment.

Asian: Includes all persons 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: Includes all persons having origins in any of the Black racial groups of Africa.

Native Hawaiian or Other Pacific Islander: Includes all persons having origins in any of the original peoples of Hawaii, Guam, Samoa, or other Pacific Islands.

White: Includes all persons having origins in any of the original peoples of Europe, the Middle East or North Africa.

DEFINITIONS FOR VETERANS

Armed Forces Service Medal Veteran: Refers to person who while serving on active duty in the Armed Forces, participated in a United States military operation for which an Armed Forces service medal was awarded.

Recently Separated Veteran: Refers to any veteran during the three year period beginning on the date of such veteran's discharge or release from active duty.

Disabled Veteran: Refers to a veteran 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, or was discharged or released from active duty because of a service-connected disability.

Other Protected Veteran: Refers to a person who served on active duty during a war or in a campaign or expedition for which a campaign badge has been authorized, under laws administered by the Department of Defense.

CODES FOR RELATIONSHIP (EMERGENCY CONTACT)

AU - Aunt/Uncle
BS - Brother/Sister
CH - Child
FA - Father
FR - Friend
GC - Grandchild
GP - Grandparent
GU - Guardian
MF - Mother & Father
MO - Mother
NN - Niece/Nephew
SP - Spouse