

## EMPLOYEE INFORMATION SHEET

### Oregon School District

Personnel/Payroll Data

#### PERSONAL INFORMATION

Social Security Number: \_\_\_\_\_

First: \_\_\_\_\_

Preferred First: \_\_\_\_\_

Middle: \_\_\_\_\_

Last: \_\_\_\_\_

Previous Last Names: \_\_\_\_\_

Home Phone Number: \_\_\_\_\_

Cell Phone Number: \_\_\_\_\_

Email: \_\_\_\_\_

Street Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

#### MISCELLANEOUS EMPLOYEE INFORMATION

Date of Birth (MM/DD/YY): \_\_\_\_\_

Ethnic Category (for EEOC Reporting):

Gender:  Female  Male

Are you Hispanic or Latino?  YES  NO

American Indian/Alaskan Native

Spouse/Partner Name (Optional):  
\_\_\_\_\_

Asian

Black or African American

Native Hawaiian or Other Pacific Islander

White

First Day of Work: \_\_\_\_\_

Job Title: \_\_\_\_\_

#### EMERGENCY CONTACT

Name: \_\_\_\_\_

Relationship: \_\_\_\_\_

Primary Phone Number: \_\_\_\_\_

Alternate Phone: \_\_\_\_\_

Name: \_\_\_\_\_

Relationship: \_\_\_\_\_

Primary Phone Number: \_\_\_\_\_

Alternate Phone: \_\_\_\_\_

Employee Signature: \_\_\_\_\_ Date: \_\_\_\_\_