

PERSONNEL INFORMATION



HIRE DATE _____ SOCIAL SECURITY # _____

TITLE (Please circle one) Dr. Mr. Mrs. Ms. DATE OF BIRTH _____

NAME _____

STREET _____

CITY/STATE/ZIP _____

PRIMARY PHONE # (_____) _____ **INDICATE IF # IS A CELL PHONE**

ALTERNATE PHONE # (_____) _____ **INDICATE IF # IS A CELL PHONE**

PERSONAL EMAIL: _____

EMERGENCY CONTACT INFORMATION:

NAME _____ NAME _____

PHONE # (_____) _____ PHONE # (_____) _____

RELATIONSHIP _____ RELATIONSHIP _____

LOCATION: (Please check the location of the primary site where you will be teaching/working)

- Romeoville Oak Brook Hickory Hills Shorewood Tinley Park
- Online **ONLY** Albuquerque Other _____

Please check the college or school in which you will be teaching:

- Arts & Sciences (department _____) Nursing & Health Professions
- Education School for Professional and Continuing Education Business

CAMPUS NOTIFICATIONS:(to be used in case of school closings, weather emergencies, et.) **INDICATE IF # IS A CELL PHONE**

Primary Emergency # _____

Other 1 Emergency# _____ Other 2 Emergency# _____

Do you want to receive emergency texts? (Circle one) **yes** **no** / **If yes, list Cell Carrier** _____

EMPLOYEE SIGNATURE _____ **DATE** _____

Optional Information

Gender (circle one) M F Marital Status (circle one) S M Maiden Name _____

Spouse's Name _____ Spouse's Date of Birth _____