

NEW HIRE EMPLOYEE DATA FORM

EMPLOYEE INFORMATION

Name:

Home Address:

Phone:

SSN:

Birthdate:

Gender: ☐ Male ☐ Female

Emergency Contact Name:

Phone:

Relation:

EDUCATION INFORMATION

Degree earned: ☐ Associate ☐ Bachelor ☐ Certificate ☐ Doctorate ☐ Master ☐ Professional (e.g., DVM, MD, JD)

Institution:

Year:

Highest Degree in Field? ☐ Yes ☐ No

Major Description:

Minor Description:

Degree earned: ☐ Associate ☐ Bachelor ☐ Certificate ☐ Doctorate ☐ Master ☐ Professional (e.g., DVM, MD, JD)

Institution:

Year:

Highest Degree in Field? ☐ Yes ☐ No

Major Description:

Minor Description:

Degree earned: ☐ Associate ☐ Bachelor ☐ Certificate ☐ Doctorate ☐ Master ☐ Professional (e.g., DVM, MD, JD)

Institution:

Year:

Highest Degree in Field? ☐ Yes ☐ No

Major Description:

Minor Description:

DEMOGRAPHIC INFORMATION*

*CSU IS REQUIRED BY LAW TO REQUEST THIS INFORMATION BUT YOU ARE NOT REQUIRED TO PROVIDE IT. ALL RESPONSES ARE CONFIDENTIAL

Ethnicity (choose one):

☐ **Hispanic or Latino/a** (A person of Cuban, Mexican, Puerto Rican, South or Central American, or other Spanish culture or origin, regardless of race.)

☐ **Not Hispanic or Latino/a**

Race (choose one or more):

☐ **American Indian or Alaska Native** (A person having origins in any of the original peoples of North and South America [including Central America] who maintains cultural identification through tribal affiliation or community attachment)

☐ **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)

☐ **Black or African American** (A person having origins in any of the black racial groups of Africa)

☐ **Native Hawaiian or Other Pacific Islander** (A person having origins in any of the original peoples of Hawaii, Guam, Samoa, or other Pacific Islands)

☐ **White** (A person having origins in any of the original peoples of Europe, the Middle East, or North Africa)

Protected Veteran Status (choose one):

This employer is a Government contractor subject to the Vietnam Era Veterans' Readjustment Assistance Act of 1974, as amended by the Jobs for Veterans Act of 2002, 38 U.S.C. 4212 (VEVRAA), which requires Government contractors to take affirmative action to employ and advance in employment: (1) disabled veterans; (2) recently separated veterans; (3) active duty wartime or campaign badge veterans; and (4) Armed Forces service medal veterans

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 Veterans Affairs, or a person who was discharged or released from active duty because of a service-connected disability.

Recently Separated Veteran

A 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.

Active Duty Wartime or Campaign Badge 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.

Armed Forces Service Medal Veteran

A 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.

☐ **I am a protected veteran.**

☐ **I am NOT a protected veteran.**

Disability Status (choose one):

You may be considered to have a disability if you have a physical or mental impairment or medical condition that substantially limits a major life activity, or if you have a history or record of such an impairment or medical condition.

☐ **Yes, I have a disability (or previously had a disability)** To discuss reasonable accommodations, contact OEO at (970)491-5836

☐ **No, I don't have a disability**

☐ **I don't wish to answer**