

Employee Data Card

PLEASE PRINT

Name _____ Social Security # _____
LAST FIRST MIDDLE

Please complete this Employee Data Card. It will supply us information needed for our payroll and benefits programs.

Present Address _____ Phone _____
STREET CITY STATE ZIP

Previous Address _____ Phone _____
STREET CITY STATE ZIP

How Long at Present Address? _____ How Long at Previous Address? _____

In the Event of an Emergency Please Notify:

1. Name _____
Address _____
STREET CITY STATE ZIP
Relationship _____ Phone (day) _____ Phone (night) _____

2. Name _____
Address _____
STREET CITY STATE ZIP
Relationship _____ Phone (day) _____ Phone (night) _____

Personal Data

Date of Birth ____/____/____ Sex Male Female

Have you ever been employed here before? Yes No

If yes, please give dates ____/____/____ to ____/____/____

Please list any friends or relatives working for us _____

Have you ever been bonded? Yes No

If yes, please explain _____

Voluntary Information

Marital Status Single Married

Name of Spouse _____ Number of Dependents including yourself _____

Dependent Children

NAME	SEX	BIRTH DATE

Reasonable Accommodation

In the event you believe there is a reasonable accommodation that will assist you in performing the essential functions of your job, please contact your supervisor.

Military

Are you a veteran of the U.S. Armed Forces? Yes No

If yes, which branch? _____ Dates of Service ____/____/____ to ____/____/____

Do you have a military obligation, including National Guard, that would affect your work schedule? Yes No

If yes, please explain _____

Languages

List any foreign language(s) you know and check the boxes that describe your ability.

 Speak some Speak fluently Read Write

 Speak some Speak fluently Read Write

 Speak some Speak fluently Read Write

Educational Background

Education: List the last three (3) schools attended, starting with the most recent.

NAME AND LOCATION	YRS. COMP.	DID YOU GRADUATE?		COURSE OF STUDY
		MAJOR	DEGREE	
		YES NO	MAJOR DEGREE	
		YES NO	MAJOR DEGREE	
		YES NO	MAJOR DEGREE	

Employment History

Employment: List your last three (3) employers, starting with the most recent.

CO. NAME AND ADDRESS	PHONE	SUPERVISOR	HOURLY PAY/SALARY
			\$
			\$
			\$

Employee's Signature _____ Date ____/____/____