

Employee Name Last	Firs	t	M.I.					
Personnel Number								
Organizational Unit Name Org Unit Phone								
Personal Data Form								
EFFECTIVE DATE From	(MM/DD/YYYY)	New	Update					
PERSONAL DATA (IT0002)								
Last Name	Known as							
First Name	Birth date							
Middle Initial	(no period) NUID (if known)							
(This is the address to which official Spouse's name (if applica	(IT0006) (no punctuation or dashes) <i>al University correspondence, includir</i> able)							
City	State	Zip						
	E-mail							
I do not wish to have	my home address information published in t	he University directory. (xdir)						
CURRENT HOME ADDRESS (ITO c/o Street	0006) (no punctuation or dashes)							
	04-4-	7:						
City Telephone	State E-mail	Zip						
WORK ADDRESS (IT0006) (no pu Building	unctuation or dashes)							
Room Number	Campus City	County						
State	Zip	Telephone						
Fax	E-mail							
EMERGENCY CONTACT (IT0006	(no punctuation or dashes)							
Name								
Telephone	Alternate Telephone							
<u>·</u>	•							



EDUCATION (IT0022) (not required for student wo	orkers)					
Date of graduation						
Type of educational institution						
Institutional name (Institute acronym preferred)						
Certificate/Degree	Is this the highest possible degree in your field?					
EDUCATION (IT0022) (additional degrees, if any) Date of graduation						
Type of educational institution						
Institutional name (Institute acronym preferred)						
Certificate/Degree	Is this the highe	st possible degre	e in your field	?	Yes No	
QUALIFICATIONS (IT0024) (skills, licenses and	certifications, if a	applicable)				
License	Programming language					
	Proficiency	Low	Average	High	Excellent	
Certification	Pro	gramming languaç	ge			
	Proficiency	Low	Average	High	Excellent	
	Fore	eign language				
Other		Low	Average	High	cellent	
Other	Fore	eign language			_	
	Proficiency	Low	Average	High	Excellent	
Employee Signature			_			