

EMPLOYEE PERSONNEL INFORMATION

Social Security No. _____

Name: _____
Last First name/Initial Middle initial/name

Address _____
Street or Route City State Zip Code

Phone Number (_____) _____ Birth Date _____ Citizen of _____
Home Month/day/year Country

Visa Type: _____

_____ Male _____ Single
_____ Female _____ Married Spouse's Name _____

_____ White _____ Oriental/Asian _____ Hispanic
_____ Black _____ American Indian _____ Other

Payroll Distribution:

_____ Direct Deposit to Bank (Mandatory)

Education:

Institution _____

Highest Degree _____

Date Graduated _____

UGA EMPLOYMENT HISTORY:

Current _____
Location

Previous _____
Date and Department