

## Human Resources New Hire Data Sheet – Part Time Employees



**Employment Group:** Check the category that applies to the position you are hired for (*chose one*):

Adjunct Faculty    
  University Assistant    
  Student Employee    
  Graduate Intern    
  Graduate Assistant

**Department Assigned To:** \_\_\_\_\_

<b>Last Name</b>	<b>First Name</b>	<b>M.I.</b>
<b>Prefix:</b> Dr.    Mr.    Ms.    Mrs. <b>Suffix:</b> Jr.    Sr.    Other:		<b>Date of Birth</b> (MM/DD/YYYY)
<b>Social Security #:</b>		<b>Gender:</b> Male    Female
Disabled*                  Not Disabled *Please contact WCSU's Diversity Officer at <a href="mailto:ode@wcsu.edu">ode@wcsu.edu</a> if work accommodations are needed		Do you have Veteran Status or Disabled Veteran Status:    YES    NO If YES: Military Branch & Service Dates:
<b>Marital Status:</b> Married    Single    Divorced		Legally Separated    Widowed
<b>Home Mailing Address:</b> Street: _____		
City: _____		State: _____      Zip Code: _____
<b>Preferred Phone #:</b>		<b>Email Address:</b>
<b>Ethnicity*:</b> American Indian/Alaskan Native    Asian    Black/African American    Hispanic/Latino Native Hawaiian/Other Pacific Islander    Not Specified    Two or more Races    White		
* In compliance with federal and state regulations, Western Connecticut State University is required to collect and maintain data on the race, sex, and ethnicity Your responses are strictly voluntary and will help in implementing Western's Affirmative Action program.		
Have you ever worked for the State of Connecticut before? If Yes, where?		YES    NO
Are you interested in receiving your paycheck via direct deposit? If Yes – Complete the <a href="#">Direct Deposit Form</a>		YES    NO
<b>Emergency Contact:</b>		
<b>Relationship:</b>		
<b>Phone #:</b>		
<b>Address:</b>		

Please sign below acknowledging that the information provided above is correct to the best of your knowledge.

\_\_\_\_\_  
**Employee's Signature**

\_\_\_\_\_  
**Date**