

Angelo State University

Employee Information Sheet

Personal Identification:

Prefix: Full Legal Name: Suffix:

Preferred Name: Campus ID (CID):

Date of Birth: Home/Cell Phone: Department:

Street Address:

City: State: Zip Code:

Emergency Contact: Emergency Contact's Name:

Relationship To You: Contact Phone:

Demographics: Complete all fields in this section which apply to you

Sex: Male Female Ethnicity: Hispanic/Latino Not Hispanic/Latino

Race: African American (AA) Asian/Pacific Islander (AS) Caucasian (CA) Alaskan Native/American Indian (AN) Other:

Military Status: *Check All that Apply* Active Wartime or Campaign Badge Veteran Armed Forces Service Medal Veteran Disabled Veteran

Other Protected Veteran Not a Protected Veteran Surviving Spouse (not remarried) Orphan of veteran killed on active duty Not a Veteran

Recently Separated Veteran Date of Separation:

Citizenship: A citizen of the United States A noncitizen national of the United States A lawful permanent resident An alien authorized to work

If other than a US Citizen: Visa Type: Country: Visa Expiration Date:

Faculty and Staff Employees Only:

Suppression of Personal Data: By state law, employees may choose whether to allow public access to their personal information that includes home address, home telephone number, emergency contact information, and information that reveals whether the employee has family members. Social Security numbers obtained by ASU will remain confidential regardless of the employee's choice to allow public access to other personal information. **Please indicate whether you wish to allow public release of the following information:**

Home Address: Yes No Home Phone: Yes No Emergency Contact: Yes No Family Info: Yes No

Prior State of Texas Service/Employment: Do you have previous State of Texas Employment? Yes No

List any position(s), including student employment, you have held (or currently hold) with ASU, another public Texas college/university, any Texas state agency, or joint state-federal agency in Texas. *Employment with junior colleges, community colleges, or independent school districts is not considered to be prior Texas state service and should not be included.*

Name of College/University/State Agency	Job Title/Position Held	Dates of Employment	Name, if different

Retiree Information: Are you currently contributing to TRS? Yes No **NOTE: If Yes, TRS will be deducted from your ASU pay**

Are you a Teacher Retirement System (TRS) Retiree? Yes No If yes, Date of Retirement:

Have you ever worked for an ISD in Texas? Yes No

Are you an ORP Retiree? Yes No If yes, Date of Retirement:

Have you ever elected ORP in lieu of TRS? Yes No

I certify that the information contained on this form is true and correct to the best of my knowledge and ability. If applicable, I authorize Angelo State University to contact my former employers to confirm the information listed above.