

BASIC PERSONNEL & ADDRESS INFORMATION

CHECK IF APPLICABLE:

NEW ADDRESS

NEW PHONE #

NEW NAME

BROOKLYN COLLEGE OF THE CITY UNIVERSITY OF NEW YORK

INSTRUCTIONS: Use form for new data and changes		Last 4digits SOCIAL SEC#	CUNYfirst Empl ID#	Date Form Completed 	DEPARTMENT: _____	
Salutation you wish used for Mailing Purposes 1. Mr. 5. Dr. 9. Ms. 2. Mrs. 6. Prof. 10. Other 3. Miss 7. Dean _____		LAST NAME _____ For change of name, print previous name: _____		FIRST NAME _____		MIDDLE NAME _____
NAME SUFFIX (Jr., III) _____		MARITAL STATUS _____				
GENDER <input type="checkbox"/> Female <input type="checkbox"/> Male	DATE OF BIRTH 	COUNTRY OF CITIZENSHIP _____	COUNTRY OF BIRTH _____		If NOT a U.S. Citizen by birth, complete <input type="checkbox"/> Naturalized Citizen <input type="checkbox"/> Resident Alien <input type="checkbox"/> Other: _____ Visa Type: _____	
CURRENT ADDRESS: _____ Apt. # _____			CITY _____		STATE _____	ZIP _____
HOME/ CELL PHONE NUMBER: _____		EMERGENCY CONTACT:				
EMAIL ADDRESS: _____		Name: _____ Relationship: _____ Phone # of Emergency Contact: _____				
DISABILITY: If yes, specify type _____			<input type="checkbox"/> None <input type="checkbox"/> Yes		Is accommodation needed? <input type="checkbox"/> Yes <input type="checkbox"/> No Has accommodation been requested? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, when _____	
PRIMARY ETHNIC/RACIAL IDENTITY: (Check ONE) <input type="checkbox"/> White (Persons, not of Hispanic origin, having origins in any of the original peoples of Europe, North Africa or the Middle East) <input type="checkbox"/> Black, not of Hispanic Origin (having origins in any of the black racial groups of Africa) <input type="checkbox"/> Hispanic (not Puerto Rican) (Mexican, Cuban, Central or South American, or other Spanish culture origin) <input type="checkbox"/> Puerto Rican <input type="checkbox"/> Asian/Pacific Islander (Far East, Southeast Asia, Indian Subcontinent or the Pacific Islands) <input type="checkbox"/> American Indian or Alaskan Native OR <input type="checkbox"/> White - Italian American (for CUNY purposes only)				U.S. MILITARY STATUS: <input type="checkbox"/> No Military Status OR <input type="checkbox"/> Active Reserve <input type="checkbox"/> Special Disabled Veteran <input type="checkbox"/> Inactive Reserve <input type="checkbox"/> Vietnam Era Veteran <input type="checkbox"/> Retired Veteran <input type="checkbox"/> Veteran (other than Vietnam)		