**AFFILIATE POSTDOCTORAL FELLOW  
PERSONAL DATA SHEET**

**(***Affiliate Postdoc Candidate must type, sign and return to home department***)**

1. Social Security Number \*\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
2. Last Name\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
3. First Name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Middle Initial \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
4. Email address\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
5. Date of Birth (MM/DD/YYYY)
6. Gender Male\_\_ Female\_\_
7. US Citizen Yes\_\_ No\_\_ (If no, what is your status?\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_)
8. Ethnicity: Hispanic/Latino \_\_ Not Hispanic/Latino\_\_ Race\_\_\_\_\_
9. Current Work Address:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
10. Current Work Phone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
11. Home Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
12. Home Phone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
13. Emergency Contact Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Relationship:\_\_\_\_\_\_\_\_\_\_\_

Emergency Contact Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Emergency Contact Phone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Signature:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**FOR FAU/COLLEGE USE**

Z Number: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_(For new appointees – please leave blank)

Dates of Appointment: From \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ To \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Home Org: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Funding Source (Agency Name)\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Employee’s Campus Location:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Tel. Ext.:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Div./College/Dept.\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**TO DEPARTMENT:** Return this completed Personal Data Sheet and signed Misdemeanor form to the Office of Postdoctoral Affairs ([postdocaffairs@fau.edu](mailto:postdocaffairs@fau.edu)) after completing the required [Screening for Foreign Researchers](https://www.fau.edu/compliance/foreign-influence/screening-foreign-researchers/index.php) (if applicable) and obtaining a successful background check from FAU HR. Attach HR’s email stating background check meets university standards.

**OTHER REQUIRED DOCUMENTS:** CV, Funding Award Notice, Mentoring Plan, Background Approval

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Florida Atlantic University is required to obtain the following information. Your cooperation is appreciated.

Have you ever been charged with a violation of the law which resulted in probation, community service, a jail sentence, the revocation or suspension of your driver’s license?

( ) YES ( ) NO

If your answer is “yes” to the above question, please provide a statement of all relevant facts in the space below.

Florida Atlantic University also requires the completion of satisfactory background check, consistent with FAU policies. This appointment is contingent upon the successful completion of a background check. Please note, if the results of the background check do not meet FAU standards, this appointment letter may be rescinded.

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Print name Signature

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date

A picture containing text

Description automatically generated

\*

Table

Description automatically generated with low confidence