

AFFILIATE APPOINTMENT PERSONAL DATA SHEET

Please Print or Type

1. Social Security Number: _____
 2. Last Name: _____
 3. First Name: _____
 4. E-mail Address: _____
 5. Date of Birth: _____
 6. Gender: M _____ F _____
 7. U.S. Citizen: Y ___ N ___ (if No, what is your status? _____)
 8. Ethnicity: Hispanic or Latino _____ Not Hispanic or Latino _____ Race: _____
 9. Work Address: _____
 10. Work Telephone Number: _____
 11. Home Address: _____
 12. Home Telephone: _____
 13. Emergency Notification
Person to Contact: _____ Relationship: _____
Address: _____ City, State, Zip: _____
Telephone Number: _____
- Signature: _____ Date: _____

FOR FAU/COLLEGE USE

Z Number: _____ (New appointees – please leave blank)

Dates of Appointment: From _____ To _____

Home Org: _____

Employee's Campus Location: _____ Tel. Ext.: _____

Div./College: _____

**FOR COURTESY
APPOINTMENTS ONLY**

PLEASE RETURN THIS FORM TO:

EMPLOYMENT MANAGER
HUMAN RESOURCES
FLORIDA ATLANTIC UNIVERSITY
BOCA RATON, FLORIDA 33431

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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.

(Print Name)

(Signature)

(Date)