



## Personal Information Form

**Legal Name:** \_\_\_\_\_  
First Middle Last

**Home Address:** \_\_\_\_\_

**Campus Address:** \_\_\_\_\_

**Phone Number:** \_\_\_\_\_  
Home Cell

**Date of Birth:** \_\_\_\_\_

**Are you a citizen of the United States?**  Yes  No

\*If you are not a citizen, please indicate your VISA type: \_\_\_\_\_

\*What is the expiration date of your VISA? \_\_\_\_\_

\*Country of Citizenship? \_\_\_\_\_

**Sex:**  Male  Female

**Gender Identity:**  Male  Female  X

**Ethnicity: Are you Hispanic/Latino?**  Yes  No

*(Select all that apply)*

American Indian or Alaska Native

Asian

Black or African American

Native Hawaiian or Other Pacific Islander

White

**Emergency Contact:** \_\_\_\_\_  
Name Relationship Phone #

**Are you a Volunteer Emergency Responder?**  Yes  No

**Please Note:** The following information is requested for Human Resource records only and will not be issued to any person other than for reporting purposes connected with your appointment as an employee of SUNY Oswego.