

HUMAN RESOURCES Illinois State University

PERSONAL DATA SHEET

Name ¹						
First Middle]	Preferred First/Nickname ²				
		Suffix				
		he Social Security Administration. If your name does not then the Social Security Administration may not credit your				
earnings to you and you may receive a reduced benefit. ² You may prefer to be addressed by your nickname. Your preferred name will not be reflected on official University documents.						
Date of Birth/_/ Gender Gender Female Male SSN ³	Home Ad Insurance m	Idress (address used for the campus phone book, ISU mailings, CMS nailings, and the State Universities Retirement System)				
³ The Social Security Number is requested as it is	Street/P.O AptCity StateZip					
for the purpose of accurately processing and	Country (i	(if other than US)				
maintaining your employment records. This	Home Pho	one ()□Preferred				
number will be translated into a university identification number (UID). Unless required by	Other Pho	one ()Preferred				
law (e.g., IRS) or by the State and local agencies (e.g., State University Retirement System) use of	Emergency Contact Information Name Home Phone()					
Address Restrictions Indicate the level of restriction you desire. Unless restricted, home phone number and address will be in the ISU telephone directory, available to the ISU operator, and visible on the database. If a restriction is elected, your department and supervisor will retain access to this information for emergency purposes (check one). No Restriction □ Restrict Home Phone Number only □ Restrict Home Address only □ Restrict Home Phone Number & Address						
Citizenship: US Permanent Resident No.	U					
Country (for Permanent Resident or Non-Immigration	ant only)_					
VISA Type: □H1 □H2 □F1 □J1						
Department Use Only		Department Use Only				
		Business Address				
Start Date:///////		Campus Box:				
Appointment Type:		Dept. Name:				
Employing Dept:		Building Code:				
Phone: ()						
Thole. ()	-	Office Number:				

		lucation History			
	n chronological order, the most recent first, including degrees expe				
Degree Type (i.e. BA, MS)					
City		State	Month/Year Conferred	/	
Degree		Institution			
Degree	Degree Institution		Institution		
High S	High School Diploma/GED yearOR- Grade School Certificate year				
If requ Registra	the University				
1.	Retirement and Benefits Information 1. Have you previously contributed to the State Universities Retirement System (SURS)? If yes, please check which plan you were enrolled in: Traditional Self-Managed Portable				
2.	Are you an annuitant (retired and receiving benefits) of the State Universities Retirement System (SURS)? \Box Yes \Box No				
3.	3. Are you retired from another retirement system with the State of Illinois (e.g., TRS)?				
4.	4. Will you be transferring unpaid sick leave, from another State Agency?				
5.	Will you be requesting Illinois State University service time or any other State of Illinois service time in calculating vour current rate of vacation? \Box Yes \Box N				

6. Are you currently enrolled as a dependent on a State of Illinois employee's health plan through Central Management Services (CMS)? □Yes □No

Illinois Educational Loan Default Act 5 ILCS 385

The Illinois Educational Loan Default Act 5 ILCS 385 requires that applicants for employment certify whether or not they are in default of an educational loan. An employee who is in default on the repayment of an educational loan for a period of six months or more and in an amount of \$600 or more shall make a satisfactory loan repayment arrangement with the maker or guarantor of the loan within six months. The employee has the opportunity to establish a repayment plan through payroll deduction. The University must receive a written certification from the maker or guarantor to confirm the establishment of a satisfactory repayment arrangement prior to the completion of the sixth month of employment, the University must terminate the individual's employment.

Please check one of the following:

 $I \ (__ am) \qquad (__ am \ not) \ in \ default \ of \ any \ such \ loan.$

Signature_____

Date_

***Faculty: Please complete and attach your resume/CV