

**Personnel Information  
THE CLAREMONT COLLEGES**

Addition

Correction

Deletion

|  |  |  |
|--|--|--|
| Name: _____ (Last) _____ (First) _____ (Initial)   |  | College: _____   |
| Campus Address: _____  |  | Department: _____  |
| Campus Extension: _____  | Title: _____                             | <input type="checkbox"/> Male<br><input type="checkbox"/> Female |
| Home Address: (Number) _____ (Street) _____ (City) _____ (State) _____ (Zip)   |  |  |
| Do you hold a valid California Diver's License: Yes <input type="checkbox"/> No <input type="checkbox"/> If Yes, Driver's License #: _____ |  | Home Phone: _____  |
| Birth Date: _____  | Name of spouse /Significant other: _____ |  |
| In Case of Emergency, notify:  |  |  |
| Name: _____  | Address: _____                           | Phone: _____   |
| Relationship: _____  |  |  |

Date: \_\_\_\_\_ Employee Signature \_\_\_\_\_ Soc. Sec # \_\_\_\_\_

Personal Email address (if you don't have a CGU address) \_\_\_\_\_