# STATE HRMS PERSONAL DATA

STATE OF NORTH DAKOTA
SFN 13091 (11-2014)

***Please Print Legibily***

**Payroll Office Use Only:**

Business Unit/Set ID Number
Department Number
Paygroup
Employee ID Number

Effective Date (mm/dd/yyyy)

## NAME HISTORY

Prefix
☐ Dr ☐ Miss ☐ Mr ☐ Mrs ☐ Ms

Legal Name (First, Middle Initial, Last) | Suffix

Preferred Name (If different from Legal Name)

## BIOGRAPHIC INFORMATION/HISTORY

Date of Birth (mm/dd/yyyy) | Gender ☐ Male ☐ Female | Marital Status ☐ Married ☐ Divorced ☐ Widowed ☐ Single | Date (mm/dd/yyyy)

Highest Education Level
☐ Less than HS Degree ☐ Doctorate-Professional ☐ Master's Degree ☐ Bachelor's Degree
☐ Technical School ☐ HS or Equivalent ☐ Post-Doctorate ☐ Doctorate-Academic
☐ Some Graduate School ☐ 2-Year Degree ☐ Some College

## NATIONAL ID

Social Security Number

**NOTE:** Employee name and social security number must match exactly what is on his or her social security card. In compliance with the Federal Privacy Act of 1974, the disclosure of the individual's social security number on this form is mandatory pursuant to 26 U.S.C. Section 3402. The individual's social security number will be used for tax reporting and as an identification number. Payment may be withheld if SSN not provided.

## ADDRESS HISTORY

Address 1

Address 2

City | County | ZIP Code + 4 – | State

Telephone Type 1
☐ Home ☐ Cell ☐ Other, specify
Telephone Number (including area code)

Telephone Type 2
☐ Home ☐ Cell ☐ Other, specify
Telephone Number (including area code)

(OPTIONAL) Email Type
☐ Business ☐ Home
Email Address

## REGIONAL

Ethnic Group
☐ American Indian/Alaska Native ☐ Asian ☐ Native Hawaiian/Other Pacific Island
☐ Black/African American ☐ Hispanic/Latino ☐ White ☐ Other - Specify: _____

*The State of North Dakota cannot mandate you to identify your race/ethnicity. However, if you choose not to designate an ethnic group by leaving this section blank, the State is required by Federal law to determine your race by visual survey or other available information.*

Military Status (Optional)
☐ Active Reserve ☐ Not Indicated ☐ Pre Vietnam-Era Veteran ☐ Veteran of the Vietnam Era
☐ Inactive Reserve ☐ Other Protected Veteran ☐ Retired Military ☐ Vietnam & Other Protected Veteran
☐ No Military Service ☐ Post Vietnam-Era Veteran ☐ Veteran (VA ineligible) ☐ Vietnam-Era Veteran
☐ Not a Veteran

**Have you previously been employed by the State of North Dakota or a ND Higher Education college or university?** ☐ Yes ☐ No

If yes, specify entity (if within the last year)

## EMERGENCY CONTACT INFORMATION

| Emergency Contact Name | | Primary Contact ☐ Yes ☐ No | |
|---|---|---|---|
| Relationship to Employee | | Same Address as Employee ☐ Yes ☐ No | |
| Address 1 | | Same Telephone as Employee ☐ Yes ☐ No | |
| Address 2 | | Contact Telephone Number | |
| Address 3 | | | |
| City | County | ZIP Code + 4 | State |

## EMPLOYEE'S SIGNATURE

| Signature | Date |
|---|---|

**FOR ADDITIONAL CONTACT PERSONS, ADDRESSES, OR TELEPHONE NUMBERS, PLEASE ATTACH ADDITIONAL SHEETS**