



Personal Information

Connors State College

Complete form and send to Human Resources
700 College Rd, Warner, OK 74469

Status: _____

All Employees Complete

Prefix	Last Name (incl suffix, e.g. Jr, Sr, III)	First Name	Middle Name	Check if Name Change & attach a copy of your new social security card. <input type="checkbox"/>
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All NEW Employees Complete - Current Employees, Enter only fields that need updated

Marital Status	Gender	Hispanic?	White Asian Native Hawaiian or Pacific Islander	Black American Indian / Alaskan Native	Birth Date (MMDDYYYY)
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Permanent Home Address (within USA)

Address			Home Phone (w/ AC)
City	State	Zip Code	

Personal Email Account: _____

Emergency Contact

Contact Name	Contact Relationship
Contact Address (Street Address, City, State, Zip Code)	Contact Work Phone (w/ AC)
	Contact Home Phone (w/ AC)

All NEW Faculty and Regular Staff Employees Must Complete

Educational Background **** List your HIGHEST degree or diploma first ****

Degree	Year Rec'd	Institution Name and Location	Field of Study

Education Experience

Years of Teaching Experience	Years in Higher Education
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Accommodation

Check any Applicable:

- Special Disabled Veteran
- Vietnam Veteran
- Other Eligible Veteran
- Disabled / Reasonable accommodation needed

This form only changes the basic employee demographic information in HRS and does not update benefits or beneficiary information or other university systems.

_____	_____	_____
Employee Signature	Telephone Number	Date

Human Resources Coding Initials _____ Date _____