WASHINGTON COLLEGE
EST. 1782

Office of Human Resources
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NEW EMPLOYEE INFORMATION SHEET

Please complete this form and submit to the Office of Human Resources upon acceptance of your hire. This information will be used to create your employee profile in the payroll system and facilitate issue of a College ID and email.

Please print clearly. **All fields are required unless indicated as optional.**

A. PERSONAL INFORMATION

Prefix: ☐ Mr. ☐ Mrs. ☐ Miss ☐ Ms. ☐ Dr. ☐ Honorable

First Name: _____ **Middle Name:** _____

Last Name:_____ **Suffix:** _____ **Preferred Name:**_____

SSN#: _____ - _____ - _____ **DOB:** _____/ _____/ _____ **Marital Status:** ☐Single ☐Married

Demographic Information (Optional): Hispanic Origin: Y/N Race*: _____ Sex: _____

*A=Asian/Pacific Islander; B=Black/African American; AI=American Indian/Alaskan Native; W=White/Caucasian; X=Two or more races.

B. CONTACT INFORMATION

If address or contact information changes after hire, please complete a Change of Personal Information form and submit to the Office of Human Resources.

Address _____

Street Name and Number or P.O. Box Number

_____

City State Zip

Primary Phone (_____) _____-_____ Phone Type: ☐Home ☐Mobile

Secondary Phone (_____) _____-_____ Phone Type: ☐Home ☐Mobile

Directory Print Authorization ☐ Yes, I give permission ☐ No, I do not give permission

*** Directory Print Authorization permits the College to publish home contact information in a password-protected directory for employees.**

Emergency Contact Information

Name_____**Phone** (_____) _____-_____ **Relationship**_____

C. SPOUSE AND DEPENDENT INFORMATION (Optional)

Dependents between the ages of 12-18 are eligible to be issued a WC ID card to permit access to campus facilities.

Name	SSN#	DOB
Spouse/Partner_____	_____ - _____ - _____	_____/ _____/ _____
Dependent _____	_____ - _____ - _____	_____/ _____/ _____
Dependent _____	_____ - _____ - _____	_____/ _____/ _____
Dependent _____	_____ - _____ - _____	_____/ _____/ _____

D. PRIOR AFFILIATION

If you have had a prior affiliation with Washington College, please indicate below. Check all that apply.

I am affiliated with the college as an: ☐ Alum ☐ Former Employee ☐Volunteer ☐Vendor (present or previous) ☐Donor

My parent/spouse/child is a: ☐ Student ☐ Alum ☐ Current/Former Employee ☐Vendor (present or previous) ☐Donor

Other (please explain):_____