East Texas Baptist University
Personnel Questionnaire

Employee Name: _____
Last First Middle Maiden Preferred Name

Mailing Address: _____
Street or P.O. Box City State Zip Code

Home Telephone No.: _____-_____ County: _____

Cell Phone Number: _____ - _____ Marital Status: _____

Religious Denomination: _____ Date of Birth (Month/Day): _____

Name of local Church where you are a member: _____

Demographic information for federal reporting (optional):

(1) Do you consider yourself to be Hispanic/Latino? ☐ Yes ☐ No

(2) In addition, select one or more of the following racial categories to describe yourself:

☐ American Indian or Alaska Native ☐ Native Hawaiian or Pacific Islander
☐ Asian ☐ White ☐ Black or African American

Campus Extension Number: _____ Campus Building Location: _____

Education:

Institutions Attended	Degrees or Certificates Earned
_____	_____
_____	_____
_____	_____

Are you employed outside of ETBU? ☐ Yes ☐ No If so, Name of Business: _____

Spouse Name_____
Last First Middle Maiden Preferred Name

Person(s) to contact in case of emergency: _____ Emergency Phone No(s). _____
_____ _____

Children Information:

Full Name	Gender- M/F	Birth Date	Dependent
_____	☐ M ☐ F	_____	☐ Yes ☐ No
_____	☐ M ☐ F	_____	☐ Yes ☐ No
_____	☐ M ☐ F	_____	☐ Yes ☐ No
_____	☐ M ☐ F	_____	☐ Yes ☐ No

This information becomes a part of your Personnel File maintained in the Financial Affairs Office.

Mark ***Yes*** or **No** below to indicate whether or not you consent to release the following information for the ETBU on-line personnel directory:

Home Phone Number: ☐ ***Yes*** ☐ ***No*** Children's Names: ☐ ***Yes*** ☐ ***No*** Date of Birth: ☐ ***Yes*** ☐ ***No***

Spouse's Name: ☐ ***Yes*** ☐ ***No*** Home Address: ☐ ***Yes*** ☐ ***No***

_____ _____
Employee Signature Date

The personal information provided will not be released to any third party, but may be utilized within the Administration of the University.