

Employee Data Sheet



WAYNE STATE
Human Resources

Date:

New Revised

HR Service Center
5700 Cass Ave, Suite 3638
Detroit, MI 48202
Phone: 313-577-3000
Fax: 313-577-0637
hr.wayne.edu

Employee Information

Legal Name (As displayed on SSN/ITIN Card) Last:	<input type="text"/>	First:	<input type="text"/>	Middle:	<input type="text"/>
Banner ID:	<input type="text"/>	Legal Sex:	Gender Designation:	Personal Pronoun:	
Date of Birth:	<input type="text"/>	Male	Male	HE He/Him	
SSN:	<input type="text"/>	Female	Female	HER Her/She	
Home Phone:	<input type="text"/>	Not Available		THEY They/Them	
Home Address:	<input type="text"/>			ZEM Zem/Zir	
City/State/Zip:	<input type="text"/>				
Campus Phone:	<input type="text"/>				
Campus Address:	<input type="text"/>				

Will 100% of the work be performed in Detroit, MI? Yes No

If No, what City, State/Province and Country will the work be performed in?

City: State/Province: Country:

Are you Hispanic or Latino?

Yes
No

Marital Status

Married
Single

Citizenship

Citizen
Non-Citizen
Permanent Resident

What is your race? (Select one or more):

AM, Native American/Native Alaskan
AS, Asian
BL, Black or African-American
PH, Native Hawaiian and Other Pacific Islander
WH, White

In which languages are you fluent?

Person to Notify in Case of Emergency:

Name:

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Address:

	City:	State:	Zip:
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Phone:

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Education History

Institution	City/State/Country	Degree	Year of Graduation

Professional Certifications and Licenses

Certification	Date	Expiration Date	Endorsed

Employee Signature: _____ Date: _____