POSTDOCTORAL FELLOW & OTHER SALARIED EMPLOYEES

(Post Doc, Fellowship Grant Trainee, Clinical Psychology Intern, Vet Intern, Vet Resident)

PERSONNEL ACTION DATA
INITIAL EMPLOYMENT

BIOGRAPHICAL DATA - To be completed by the employee

Name (last, first, middle) _____ Social Security No. _____/_____/_____

Sex: ___ M ___ F

Ethnic Origin: ___ American Indian or Alaskan Native; ___ Asian; ___ Black or African American; ___ Hispanic or Latino (White race only); ___ Hispanic or Latino (All other races); ___ Native Hawaiian or other Pacific Islander; ___ White

*Military Status: ___ Not a Veteran; ___ Veteran; ___ Vietnam Veteran; ___ Disabled Veteran; ___ Disabled Vietnam Vet

Disabled: ___ Yes ___ No

* Other options in Oracle not in use

Address _____ City _____ State _____

Zip _____ Home Phone (_____)_____ Birthdate: _____

Emergency Contact _____ Phone (_____)_____ H/W Relationship _____

Sample

APPOINTMENT DATA - To be completed by the department (Optional)

Visa Type _____ Work Phone (____)_____

Department _____ Hire Date _____ Job Title _____

Salary _____ Salary Basis _____ Work Hours _____ per Week

(Contract, Regular 12 mo, Regular 9 mo)

Employee Group Other Salaried Employee Employee Qualifier Non-Federal Payroll Monthly

Employment Category Temporary Appt End Date _____ Change Reason All/New Hire

(Not used for Vet Resident or Fellowship Grant Trainee)

CSU Fund Number (can have as many as needed)	Start Date	Percent
1. _____	_____	_____
2. _____	_____	_____
3. _____	_____	_____

NOTE: The I-9, Oath of Allegiance, and Creative Works Policy forms must be sent to Human Resource Services, Records Office, before the electronic approval of this new hire can be made. The W-4 and Payment Disposition Action (PDA) forms must be sent directly to the Payroll Office.

Revised 10/2003