

# External Employee Information

Please complete all information and return form to the Campus Police office. This form is required for enrollment in the Jenzabar database and must be completed before obtaining a Shield card.

Information entered into this form is regarded as confidential. Please submit completed forms to the Campus Police office via secure e-mail or by hand-delivery only. Please do not submit these forms via interoffice mail. Thank you.

**Mark applicable box:**

Lifeway

Pioneer

Sodexo

Date:

New

Revised

## Employee Information

Last Name:

First Name:

Middle Name:

Address:

City:

State/Province:

Zip/Postal Code:

E-mail:

Home Phone:

Cell Phone:

**Mark here to receive emergency text message notifications**

SS Number:

Birth Date:

Gender:

Marital Status:

Spouse Name:

## Person to Notify in Case of Emergency

Name:

Address:

City:

State/Province:

Zip/Postal Code:

Home Phone:

Work Phone:

Cell Phone:

Relationship:

## Employee Status

Date of employment:

Job title:

### Type of Employment

Full-Time

Part-time

Contractor

### Student Status

Not Enrolled

Part-time

Full-time