

## CALS EMPLOYEE FACT SHEET

Name (Last, First, Middle): \_\_\_\_\_

Local Address (# Street): \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Alien # (required): \_\_\_\_\_

Telephone Number: \_\_\_\_\_

Current E-mail Address: \_\_\_\_\_

Text-enabled Phone Number (required): \_\_\_\_\_

Birthdate (mm/dd/yyyy): \_\_\_\_\_

Ethnicity: \_\_\_\_\_

**A** – Asian; **B** – Black or African American; **H** – Hispanic or Latino, regardless of race;

**I** – American Indian or Alaskan Native; **N** – Native Hawaiian or Other Pacific Islander;

**W** – Caucasian, White

\*To meet OFCCP (Office of Federal Contract Compliance Programs) compliance obligations, Cornell University is required to report the race/ethnicity of its employees. You may choose more than one race/ethnicity or choose the one you most identify with.

Gender: Female \_\_\_\_\_ Male \_\_\_\_\_ Non-Binary \_\_\_\_\_

Citizenship Status\*: \_\_\_\_\_

\*NV-Native US born, NZ-Naturalized US Citizen, AP-Alien Permanent, AT – Alien Temp

Birth Country: \_\_\_\_\_

Visa Type: \_\_\_\_\_

Visa Expiration Date: \_\_\_\_\_

Highest Degree: \_\_\_\_\_

Date Earned (mm/dd/yyyy): \_\_\_\_\_

Specialization: \_\_\_\_\_

Institution: \_\_\_\_\_

In Case of Emergency, Notify: \_\_\_\_\_ Telephone: \_\_\_\_\_ Relationship: \_\_\_\_\_

Department and Supervisor: \_\_\_\_\_

\_\_\_\_\_