

HUNTER

The City University of New York

PERSON OF INTEREST (POI) DATA FORM

GENERAL INFO	Prefix _____	EMERGENCY CONTACT INFO	First Name _____ Last Name _____
	Last Name _____		Address _____
CONTACT INFORMATION	First Name _____ Middle Name _____	CUNYFIRST DATA	City _____ State _____ Zip Code _____ () ()
	Address _____		Home Telephone # _____ Work Telephone # _____
	City _____ State _____ Zip Code _____ () ()		Job Title _____
	Home Telephone _____ Work telephone _____		Begin Date* _____ End Date* _____
PERSONAL INFO	Social Security Number _____ Date of Birth _____	PAYROLL INFORMATION	Department _____
	Gender: <input type="checkbox"/> Female <input type="checkbox"/> Male		Û] ^!çã [!© Name (Print) _____ Signature/ Date _____
MARRITAL STATUS	Married	SUPERVISORY ROLE INFO	Are you on tax levy(city or state payroll) or non-tax levy Research Foundation)?
	Single		Yes _____ No _____
MILITARY STATUS	Divorced	EMPLOYEE INFORMATION	If yes, which Payroll? _____
	Legally Separated		Will you Have Supervisory Responsibilities?
ETHNICITY	Widowed	EDUCATIONAL DATA	Yes _____ No _____
	Veteran- Vietnam		If yes, list names of employees to be supervised: _____
EDUCATIONAL DATA	Veteran- other than Vietnam	FOR HUMAN RESOURCES USE ONLY	Reasons for POI request(systems requested and how they pertain to your job function): _____
	No Service		Employee Signature _____ Date _____
EDUCATIONAL DATA	Please check the category that is most appropriate to your background.*	CF Empl ID _____	POS # _____ CUNYFIRST Entry By _____ Date _____
	<input type="checkbox"/> White (not Hispanic) <input type="checkbox"/> Asian <input type="checkbox"/> Black (not Hispanic) <input type="checkbox"/> American Indian or Alaskan Native <input type="checkbox"/> Hispanic (of any race) <input type="checkbox"/> Italian American <input type="checkbox"/> Puerto Rican <input type="checkbox"/> Native American or Pacific Islander		Highest Educational Level: (Attach proof of degree)
EDUCATIONAL DATA	<input type="checkbox"/> High School Diploma or Equivalence <input type="checkbox"/> Associate Degree <input type="checkbox"/> Bachelors Degree <input type="checkbox"/> Masters Degree <input type="checkbox"/> Doctorate		

*We are required by law to monitor our Affirmative Action Program, and to collect ethnic data on all employees under Federal Executive Order #11246. Submission of this information is voluntary.

Do not email this form as it contains sensitive information. You can fax the completed form to 212-650-3889 or submit to HR room 1502E.