

DINING SERVICES EMPLOYEE DEMOGRAPHICS

JOB NUMBER: _____ Please print legibly

NAME _____ UNIVERSITY A# _____
Last First MI
LAST FOUR SS# _____

1. MAILING ADDRESS

Street Address _____
City/State/Zip _____
Telephone _____
E-Mail _____

2. EMERGENCY CONTACT

Name _____ Relationship _____
Telephone _____

3. BIRTHDATE ___ / ___ / ___ MM DD YR

4. STUDENT STATUS

Non-student Full Time Graduate Part
Full Time Undergraduate Time Graduate
Part Time Undergraduate

5. ETHNICITY

American Indian Multicultural
Asian/Pacific Islander Unspecified/other
Black, Non-Hispanic White, Non-Hispanic
Hispanic

YOU MUST SET UP DIRECT DEPOSIT (Please fill out Direct Deposit form)

All I9's need to be filled out electronically with Lezlie (797-3118) or Caron (797-5670) at the Business and Finance Transaction Center at 1330 E 700 N

****MANAGER USE BELOW LINE****Please circle Location and Area where the employee will be working
Departments

ABCB - A24813	Emmas Nook – A029303	Quadside - A07877
Bakery - A24812	Hub - A07905	Quickstop - A07875
Catering - A14907	Junction - A07879	Shaw's 88 - A33738
Commissary - A29292	Luke's - A24814	Skyroom - A14905
Concessions – A36833	Marketplace - A14906	FSA - A07904

Pay Rate: _____ Supervisor: _____

TC-1# _____ COMPLETED DATE _____
EPAF# _____ COMPLETED DATE _____