Personal Data Form

The Personal Data Form may be used for a new or current employee. If you are a current employee, and are updating information, the following documents must be attached to this form:

• For change in name, a copy of Social Security card with new name

Student Employee

• For members of Religious Order, a letter from Religious Order verifying exemption from federal tax and FICA withholding and providing Direct Deposit Information. Please indicate which section(s) should be updated:

Employee Data				
Last Name	First Name	Middle Initial		
Birthdate (mm/dd/yyyy)	State or Country of Birth	Gender		
Citizenship Status				
If non-US citizen, indicate country of citizenship				
Have you ever been employed by Boston College?				
If yes, select what type of position you held: FT/PT Employee Temp Pool				

Permanent (Legal) Address (for non-US Citizens, please use non-US address)				
Street Address	Apartment Number			
Optional Address Line	Post Office Box Number			
City	State	Postal Code		
Country	Telephone Number (including area code)			
Local Address				
Street Address	Apartment Number			
Optional Address Line	Post Office Box Number			
City	State	Postal Code		
Country	Telephone Number (including area code)			
Emergency Contact				
Name	Relationship			
Telephone Number (including area	code)			

Additional Information

If you are a member of a Religious Order please indicate: (Complete only if you are a member of a Religious Order.)

Boston College Jesuit

Non-Boston College Jesuit or Other Religious Order

Please attach a copy of letter from Order verifying exemption from withholding and confirming Direct Deposit information.

Voluntary Self Identification for Employees

Boston College is an equal opportunity employer and is committed to a policy of employment without regard to race, color, national origin, sex, religion, disability, age, marital or parental status, genetic information or family medical history, military status, and to comply with state law prohibiting discrimination on the basis of a person's sexual orientation or any other classification protected under federal, state or local law.

To help us comply with federal and state equal employment opportunity recordkeeping and other legal requirements, we invite you to complete the following information. Submission of this information is **voluntary** and refusal to provide any or all of the information requested, will not subject you to any adverse treatment. All information provided will be considered confidential and kept separate from your personnel file. In addition, the information will only be used in a manner consistent with the goals and requirements of the law and the University's Affirmative Action Program.

Gender Ethnicity: Are you Hispanic/Latino?

Race (Please refer to definitions below and check accordingly)

American Indian or Alaskan Native

Asian

Black or African American

Native Hawaiin or Other Pacific Islander

White/Caucasian

Ethnicity: **Hispanic or Latino**- A person having origins of Cuban, Mexican, Puerto Rican, Central or South American or other Spanish culture or origin, regardless of race.

Race:

American Indian or Alaskan Native_- A person having origins in any of the original peoples of North and South America (including Central America), and who maintains tribal affiliation or community attachment.

Asian - A person having origins in any of the original peoples of the Far East, Southeast Asia, or the Indian subcontinent, including, for example, Cambodia, China, India, Japan, Korea, Malaysia, Pakistan, the Philippine Islands, Thailand, and Vietnam.

Black or African American - A person having origins in any of the Black racial groups of Africa.

Native Hawaiian or Other Pacific Islander - A person having origins in any of the peoples of Hawaii, Guam, Samoa, or other Pacific Islands.

White/Caucasian - A person having origins in any of the original peoples of Europe, the Middle East or North Africa.

Signature	Date			
Processing (to be completed by HRSC Representative)				
Eagle ID (Last 8 digits on BC Eagle-One Card):	Processed in HRSC by:			
Date:				

Signature