



## Personal Information Form

### Employee Information

Date: \_\_\_\_\_ Penn ID(if applicable): \_\_\_\_\_  
 D.O.B: \_\_\_\_/\_\_\_\_/\_\_\_\_ Start date: \_\_\_\_\_  
 Marital Status: \_\_\_\_\_ E-mail: \_\_\_\_\_  
 Legal First Name: \_\_\_\_\_ Middle Initial: \_\_\_\_ Last Name: \_\_\_\_\_  
 Address: \_\_\_\_\_ Apt#: \_\_\_\_\_  
 City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_  
 Mobile #: \_\_\_\_-\_\_\_\_-\_\_\_\_ Home#: \_\_\_\_-\_\_\_\_-\_\_\_\_  
 U.S Citizen: Yes / No Authorized to work in U.S: Yes / No Has documentation: Yes / No  
 Work authorization Expiration Date: \_\_\_\_/\_\_\_\_/\_\_\_\_ Country: \_\_\_\_\_  
 Job Title/Position hired at Penn: \_\_\_\_\_  
 School/Dept.: Social Policy & Practice SP2

### Education

Highest degree (see codes below): \_\_\_\_\_ Institution/School: \_\_\_\_\_  
 Degree conferred: \_\_\_\_/\_\_\_\_/\_\_\_\_ Anticipated graduation date: \_\_\_\_/\_\_\_\_/\_\_\_\_

<b>A</b> - No academic credentials	<b>B</b> - High School Diploma or equivalent
<b>C</b> - Trade Certificate	<b>D</b> - Some College
<b>E</b> - Associate Degree	<b>F</b> - Bachelor's Degree
<b>G</b> - Master's Degree	<b>H</b> - Medical Doctorate (M.D., D.D.S., D.V.M., V.M.D.)
<b>I</b> - Other Doctorate (Dr. of Educ., Dr. of Sct., LL.D.)	<b>J</b> - Doctor of Philosophy (Ph.D.)

### Emergency Contact Information

Name: \_\_\_\_\_ Relation: \_\_\_\_\_ Phone #: \_\_\_\_-\_\_\_\_-\_\_\_\_  
 Full Address: \_\_\_\_\_