University of Washington | Human Resources

### PERSONAL DATA FORM (FOR DEPARTMENTAL USE ONLY)

**For instructions on completing this form in MS Word see:** <http://www.washington.edu/admin/hr/forms/instructions.html>

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| section I – employee information |
| Employee Last Name:       | First Name:       | Middle:       | EID:    -   -    |
| Home Department Name:       |  UW Box:       |
| Work Phone 1:    -   -     | Work Phone 2:    -   -     |  Work County:       |
| Local Address:       | Apt. No., Route, etc:       |
| City:       | County:       | State:       | ZIP:       |
| Permanent Address (if different):       | Apt. No., Route, etc:       |
| City:       | County:       | State:       | ZIP:       |
| Home Phone:    -   -     |
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| section Ii – emergency contact information |
| Emergency Contact Name:       | Day Phone:    -   -     | Evening Phone:    -   -     |
| Alternate Emergency Phone:    -   -     |
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| section Iii – education information |
| Educational Level (check one): |
| [ ]  01 No Academic Credit | [ ]  04 High Sch. Diploma/Eqv. | [ ]  07 Assoc. of Arts | [ ]  10 Professional Degree (e.g., M.D., D.D.S., J.D.) |
| [ ]  02 Grade School | [ ]  05 Trade Sch. Certificate | [ ]  08 B.A./B.S. | [ ]  11 Ph.D. |
| [ ]  03 Some High School | [ ]  06 Some College | [ ]  09 M.A./M.S. | [ ]  12 Other Degree (e.g., Dr. of Education,  Dr. of Science) |
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| section iv – campus address listing information |
| Name (as it should appear in the Faculty/Staff Directory):      |  |
| Title:      | Alternate Title:      |
| Department:      | Alternate Department:      |
| Address:      | Alternate Address:      |
| Voice Mail:   -   -     | TDD:   -   -     | FAX:   -   -     |
| Email:      | Alternate Email:      |
| Directory Address (check one): [ ]  Campus [ ]  Email [ ]  Home [ ]  Unlisted |

**Distribution**: Retained by employer and available for departmental audit.