

**BRYN MAWR COLLEGE**  
**Non-Employee Affiliate Information Sheet**

**PLEASE PRINT**

**Personal Information**

Name \_\_\_\_\_ BMC Id No. \_\_\_\_\_

Home Address \_\_\_\_\_ Phone Number \_\_\_\_\_

Date of Birth \_\_\_\_\_

Personal Email \_\_\_\_\_

Emergency Contact Name \_\_\_\_\_

Emergency Contact Phone \_\_\_\_\_

**Appointment Information**

Department or Center \_\_\_\_\_

Status \_\_\_\_\_ Tri-College or Penn Faculty (based at Haverford, Swarthmore, UPenn)

\_\_\_\_\_ Volunteer

\_\_\_\_\_ Other \_\_\_\_\_

\_\_\_\_\_  
**Signature**

\_\_\_\_\_  
**Today's Date**