

# Bryn Mawr College Employee Information Sheet

*Please print clearly*

Name (Last,First I):		BMC Id No:
Marital Status:	Spouse/Partner's Name:	
Preferred Name (if different):		
Social Security Number:		Gender: <input type="checkbox"/> Female <input type="checkbox"/> Male
US Citizenship:	Birthdate:	Ethnicity:
Alien Status:		Country:
Visa Type/No:		Expiration Date:
<input type="checkbox"/> Disabled Vet <input type="checkbox"/> Vietnam ERA Vet <input type="checkbox"/> Other (see attached for criteria)		
Home Address No P.O. Boxes		
		Phone:
Mailing Address (if different)		
Emergency Contact	Name:	Relationship:
	Address:	Phone Number:
		Other Phone:
Bryn Mawr Status: <input type="checkbox"/> Staff <input type="checkbox"/> Faculty		
Department where you will be working:		
<p>The College publishes an online directory on its web site. Your preferred name, title, department, office extension, and work email address will be automatically included.</p>		

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date