THE UNIVERSITY OF SOUTHERN MISSISSIPPI

EMPLOYEE DATA FORM

E-Verify WSR EPAF # _____

Employee ID (if known) _____ **Employee's Legal Name** _____

Note: The employee's Legal name must match that as recorded by the Social Security Administration (SSA). If your name is not correct with SSA, you must update your records with that office.

Employee's Preferred Name _____

Date of Birth:_____ **Marital Status:** ☐ Single ☐ Married

Sex: ☐ Male ☐ Female **Social Security Number**:_____

Highest Level of Education: ☐ HS/GED ☐ Associate ☐ Bachelor ☐ Masters
☐ J.D./M.D. ☐ Ed.D. ☐ Ph.D. ☐ Other Explain: _____

Citizenship Status: ☐ A citizen of the United States ☐ A noncitizen national of the United States
☐ A lawful permanent resident ☐ An alien authorized to work

Hiring Department: _____ **Expected Start Date:** _____

Registered with US Selective Service: Yes: _____ No: _____ Must be registered with Selective Service if you are a male between the ages of 18 to 25.

Addresses (Definitions are on page 2):

Home Address: _____ City: _____ State: _____ Zip: _____

Mailing Address: _____ City: _____ State: _____ Zip: _____

Phone: _____ Email Address: _____

Ethnic Origin (Ethnic Group definitions are on page 2):

Are you Hispanic or Latino? ☐ Yes ☐ No

What is your race? Select only one

☐ American Indian or Alaska Native ☐ Asian ☐ Black/African American
☐ Native Hawaiian or Another Pacific Islander ☐ White ☐ Multi – Two or more Races

---

Previous State of Mississippi Employment:

Have you been employed by the State of Mississippi before? ☐ Yes ☐ No

If yes, what agency/department?_____Dates of Employment _____

Are you currently contributing to PERS? ☐ Yes ☐ No

Are you currently receiving Retirement Benefits from PERS? ☐ Yes ☐ No

---

Signature _____ **Date** _____

Confidentiality *- Under federal law, The University of Southern Mississippi is required to collect and report data regarding the gender, racial, and ethnic composition of its workforce. This information is used for reporting administrative purposes.*

Instructions:

Employee: Complete and sign the form. The form can be provided in one of three ways below.

Hattiesburg
Fax: 601-266-4541 (Human Resources)

Mail: Human Resources
118 College Drive #5111
Hattiesburg, MS 39406

Gulf Coast
Fax: 228-214-5412 (Human Resources)

Human Resources
730 East Blvd
Long Beach, MS 39560

Department: Do not retain a copy of this form as it contains protected information.

Definitions:

Addresses:

Home Address: The place where the employee physically resides. For Foreign Nationals, the Home address must be their Foreign Address, and the mailing address will be their local address.

Mailing Address: The place the employee receives his or her mail. This must be completed only when the address is different from their home address.

Ethnic Origin:

American Indian or Alaska Native: A person having origins in any of the original peoples of North American, and who maintain cultural identification through tribal affiliation or community recognition.

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/African American: A person having origins in any of the Black racial groups of Africa.

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

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

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

Multi – Two or more Races: All persons who identify with more than one of the above five races.