

**EMPLOYEE INFORMATION QUESTIONNAIRE
PERSONNEL INFORMATION**

Date of Hire: _____

Employee ID Number: _____ Position Title: _____

Social Security Number: _____

Full Time: _____ Part Time: _____ Temp: _____ Relief: _____ Seasonal: _____

NAME: (As it appears on Social Security Card)

Last: _____ First: _____ Middle: _____

Street Address _____

City, _____ State: _____ Zip: _____ County: _____

Home Phone: _____ Cell Phone: _____

Email Address: _____

Date of Birth: _____ State of Birth: _____

Male: _____ Female: _____ Marital Status: _____

Ethnicity: _____ Yes, Hispanic or Latino
_____ No, Not Hispanic or Latino

Race: _____ American Indian or Alaska Native _____ Native Hawaiian or other Pacific Islander
_____ Asian _____ White
_____ Black or African American _____ Two or More Races

U.S. Citizen: Yes: _____
No: _____ If No, Alien Number: _____

Veteran: Yes: _____ No: _____
Reserves: Yes: _____ No: _____ Branch: _____

Highest Level of Education Completed:

High School:	_____	Bachelor:	_____
G.E.D.:	_____	Masters:	_____
Associates:	_____	Doctorate:	_____

School Name, Year Graduated, Major: _____

Driver's License No.: _____ **Expiration Date:** _____

Driver's License Class: (A, B, C, D, or E) _____ **Endorsements:** _____

Outside Employment: Yes: _____ (if Yes, please request form for Personnel File)
No: _____

Is file EXEMPT from Public Records Act? Yes: _____ No: _____

Active Law Enforcement Personnel: _____ Spouse of Active Law Enforcement Personnel: _____

Former Law Enforcement Personnel: _____ Spouse of Former Law Enforcement Personnel: _____

Certified Firefighter: _____ Spouse of Certified Firefighter: _____

Other: _____

Emergency Contact Information:

1st Contact Name: _____

Telephone Number: _____ Relationship: _____

2ndContact Name: _____

Telephone Number: _____ Relationship: _____

Are members of your family or relative (either by blood or marriage) employed by the Pasco County Board of County Commissioners: Yes: _____ No: _____

Name: _____

Relationship: _____

Department: _____

Please Use this space for additional information: _____

Employee Signature

Date