SOUTHERN ILLINOIS UNIVERSITY **EDWARDSVILLE**

EMPLOYEE DATA COLLECTION & DATA CHANGE FORM

(Admin./Prof. Staff, Civil Service, & Faculty)

Office of Human Resources | Box 1040 | Edwardsville, IL 62026 | Phone 618.650.2190 | Fax 618.650.2696

IDENTIFICATION	N & CUNTACT	INFORIVIATION							
Name: Banne									
To change your legal name, submit an updated W-4 card, a copy of the Social Security card, and one of the following (for whichever method applies): a marriage certificate; divorce decree; or a court order of the name change.									
		employee; however, r			er the following name	(s) rather			
Preferred First Nam	e (other than cur	rent legal name): _							
		ee. I am a mission as a studer			ent.				
Address & Phone: N through Banner Self					er(s) below. <u>Address</u>	and pho	ne changes sho	ould be made	
Day Phone: Alternate Phone (if applicable):									
Mailing Address:									
Email Address:	Number Street			City		State	Postal Code		
of my personal cont events, promotions, records will also bed	act information (h , notifications and come confidential	nome address, hom /or mailings. (NOT) if this option is sele	ne telephone no E: Please conta ected for your e	umber, spouse in ct the Office of th mployment recor	formation) in a dire ne Registrar to deter rds).	ctory pub mine who	lication and/or at information	release, or publication r for University-related on your student t at siue.edu/cougarnet).	
					<u> </u>				
Marital Status:	Divorced (D) Separated (P)	Married (M) Single (S)	Other (O) Rather not s _i	pecify (R)					
Spouse's Name:									
Spouse's Address: _ (If address is same as employee's leave blank.)	Number Street			City		State	Postal Code	-	
Day Phone:		Alternate Phone	(if applicable)	:					
Emergency Contact Relationsl	(if other than, or hip:		ouse):						
Name:									
Mailing A	ddress:								
	Number	Street			City		State Pos	tal Code	
Phone:									
CAMPUS ADDRE	ESS & PHONE I	NFORMATION	(For change n	ot submitted on an	employment contract	.)			
Box No.:	Building:		Room	No.:	_ Phone:				
Campus Location:	Carbondale	E. St. Louis	Alton	Edwardsville	Springfield				
OTHER BIOGRAI	PHICAL INFOR	MATION							
Sex: Male	Female	Gender Identity:		Pron	ouns:				
	of these responses a urself Hispanic or	re available on the Hu Latino? Hisp or more of the fol Native Asian	uman Resources vanic or Latino lowing that de	Forms webpage, in Not Hispan	= -	-		te agencies.	
Country of Citizens	hip (if other than	United States):							
Employee/Student Signature:						Date:			