

Central Connecticut State University
EMPLOYEE INFORMATION FORM

Please return to: CCSU, 1615 Stanley Street, Human Resources LD 201, New Britain, CT 06050

APPLICANT INFORMATION

Legal Name (Last, First, M.I.):

Preferred Name (if applicable):

Preferred Prefix: None Mr. Mrs. Ms. Miss Dr.

Suffix (i.e. Jr, Sr., II, etc.):

Current address:

City:

State:

ZIP Code:

Email Address:

In the Event of an Emergency on Campus Best Phone Number to be Reached:

Cell Phone:

Home Phone:

Gender:

Residency Status:

Race/ Ethnicity (Federal/ State Coding): *Mark all that apply*

Black/ African American

White

Hispanic/ Latino

Native Hawaiian/ Other Pacific Islander

Asian

American Indian/
Alaskan Native

Not Hispanic/ Latino

EMERGENCY CONTACT

Name (Last, First):

Current address:

City:

State:

ZIP Code:

Relationship:

Phone #:

HIGHEST DEGREE EARNED

Institution:

City and State:

Dates Attended:

Degree/ Diploma: