Northwestern	Personal Data Form
HUMAN RESOURCES Type	of Request: New Hire Address Change Name Change
PERSONAL INFORMATION	
Name Socarras First: Brando	Middle: Northwestern ID Number: (if available)
Former Legal Name: (If requesting a Name Change; a copy of your Social Security Card showing your updated Legal Name must be attached)	
Birthdate: (MM/00/YYYY) I identify my gender as: Marital Statu	s: National Provider Identifier/NPI: (Feinberg faculty physicians only) Married
Country of Citizenship: Visa/Residency:	U.S. Permanent Resident (not a U.S. citizen) Social Security Number: (new hires only)
In which state will you be performing work for Northwestern?	Are you interested in contributing to the Northwestern University Voluntary Savings Plan, a 403b pre-tax retirement savings plan? Yes
Note: New hires must complete Form I-9 online (northwestern.I9servicecenter.com) by the end of their first day of work and provide required documentation to be employed and paid. If you are not a U.S. citizen or permanent resident, contact payroll@northwestern.edu to complete information in the Foreign National Information System (FNIS).	
	ne Address; update your contact information anytime at <u>www.northwestern.edu/myhr</u> .
Local Home Address Is this address part of on-campus student housing? Yes	Secondary Mailing Address (optional; please enter if your Local Home Address is unknown)
	Number & Street: Apt #:
910 Williamsburg Vr	3
Number & Street: 910 Williams burg Dr City: Charlesta State: ZIP/Postal Code: 61920 Country: VSA	City: State:
ZIP/Postal Code: Country: USA	ZIP/Postal Code: Country:
Work Phone Number (indicate main office/department number if you do not know your direct extension):	
Primary Horne/Cell Phone Number: (217) 218-1717	Secondary Home/Cell Number: (optional)
Personal Email Address: (optional) brandos 759 agmail.com	
DEMOGRAPHIC DATA	
Are you Hispanic or Latino? What is your race? (select one or more) American Indian or Alaska Native Black or African American White	
Yes No American Indian or Alaska Native	Native Hawaiian or Other Pacific Islander
Non-Discrimination Policies: Northwestern University is committed to providing an environment free of discrimination, harassment, and retaliation. Please visit the following websites to learn more about Northwestern's non-discrimination policies and complaint processes: www.northwestern.edu/hr/equlopp-access and	
www.northwestern.edu/sexual-harassment.	
SIGNATURE	
Signature: Metust Bound	Date: 5/25/20
FOR TEMPORARY EMPLOYEES ONLY — to be completed by the hiring department	
Northwestern Student Status: Does this assignment require driving? Yes No	
Student Non-Student Does this assignment require access to Northwestern Memorial Hospital records? Yes No	
	Dept ID#: Job Code: Hourly Rate: Time Entry: 0800 \$ 15.00 ☐ Swiper ☐ Non-Swiper
Fund: FN Dept: Project:	Activity: Chartfield1: Account:
Supervisor Name. Supervisor ID: (7 digits) Supervisor	Position# Supervisor Phone:) Supervisor Signature:)

Administrators: For temporary employees, review the hiring checklist and submission instructions at www.northwestern.edu/hr/temphires. For all others, mail or bring the original form along with other relevant hire paperwork to HR Operations, 720 University Place, 2nd Floor, Evanston, IL 60208.

KRONOS BACKUP SUPERVISOR: MEGAN WOOD, ID# 2717046; 66209