

Updated 2/23/18

MOUNT SAINT MARY'S UNIVERSITY FACULTY VOLUNTARY INFORMATION SHEET

THIS INFORMATION WILL BE KEPT IN A CONFIDENTIAL FILE AND WILL BE USED TO COMPLY WITH FEDERAL/STATE RECORD KEEPING, REPORTING AND OTHER LEGAL REQUIREMENTS.

NAME IRMA RAVKIC DEPARTMENT PHYSICAL SCIENCES/MATHEMATICS

ADDRESS 1260 SOUTH BEVERLY GLEN BLVD APT # 406
LOS ANGELES, CA ZIP 90024 CELL PHONE (424) 371-4152

HOME PHONE (424) 371-4152 EMAIL ADDRESS irma.ravkic@gmail.com

RANK/POSITION Assistant Professor

PART-TIME ☐ FULL-TIME ☒ TENURED ☐ TENURE TRACK ☐ TERM ☐

HIGHEST DEGREE EARNED PHD CAMPUS: CHALON ☒ DOHENY ☐

DATE OF EMPLOYMENT 8/15/2018 FIRST YEAR AT MSMU: 20 18

DATE OF BIRTH 02/02/1986 GENDER: MALE ☐ FEMALE ☒

ETHNICITY: ARE YOU HISPANIC/LATINO? (A person of Cuban, Mexican, Puerto Rican, South or Central American, or other Spanish culture or origin, regardless of race.)

☐ Yes, Hispanic or Latino
☒ No

RACE: REGARDLESS OF YOUR ANSWER TO THE PRIOR QUESTION, PLEASE SELECT ONE OR MORE OF THE FOLLOWING THAT BEST DESCRIBE YOU:

- ☐ American Indian or Alaska Native (including all Original Peoples of the Americas)
☐ Asian/Pacific Islander (including Indian subcontinent and Philippines)
☐ Black or African American (including Africa and Caribbean)
☐ Native Hawaiian or Other Pacific Islander (Original Peoples)
☒ White (including Middle Eastern)

ARE YOU CURRENTLY EMPLOYED AT MSMU? YES ☐ NO ☒

IF YES, IN WHAT CAPACITY? PART TIME STAFF ☐ FULL TIME STAFF ☐

CONTRACTOR ☐ (Please specify contractor/vendor: _____)

IF YES, LIST YOUR CURRENT: HOME DEPARTMENT _____ POSITION TITLE _____
SUPERVISOR NAME _____

IN CASE OF EMERGENCY NOTIFY:

NAME GUY VAN DEN BROECK RELATIONSHIP HUSBAND

ADDRESS: 1260 S BEVERLY GLEN BLVD #406 PHONE (650) 479-4938