

Personal Data Sheet

Personal Information (Information needed for Payroll) **DATE:** _____

Name Mary Smith

Address 1234 Main

City, ST Zip Buffalo Grove, IL 60089

County USA

Country(circle) United States or Canada Home email mary.smith@gmail.com

Name of School District {name_of_school_district}

(Mandatory for residents of OH, PA, MD, IN)

Home Phone 1234567 Cell Phone 123456

Birth Date 1/1/1900

Male ____ Female ____ Marital Status: Married ____ Single ____

Time Zone: Eastern Central Mountain Pacific Arizona Alaska Hawaii

Race Information (optional – for EEOC Reporting)

Caucasian ____ African-American ____ Hispanic or Latino____ Asian ____

American Indian/Native Alaskan ____ Native Hawaiian or Other Pacific Islander____

Other _____

Emergency Contact(s) Information

Name Diane Relation Mother

Home Phone 123456 Cell Phone {emergency_contact_cell_phone_1}

Name {emergency_contact_name_2} Relation {emergency_contact_relation_2}

Home Phone {emergency_contact_home_phone_2} Work Phone {emergency_contact_work_phone_2}

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