

# NEW EMPLOYEE MASTER RECORD

## PERSONNEL DATA

NUMBER: \_\_\_\_\_ NAME: \_\_\_\_\_

DEPARTMENT: \_\_\_\_\_ JOB CLASS: \_\_\_\_ LOCATION NUMBER \_\_\_\_

SOCIAL SECURITY NUMBER: \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_

EMPLOYEE CATEGORY: (F) \_\_\_\_\_ (P) \_\_\_\_\_ (T) \_\_\_\_\_

MARITAL STATUS: \_\_\_\_\_ EMPLOYMENT DATE: \_\_\_\_/\_\_\_\_/\_\_\_\_

LEAVE ABS. DATE: SKIP BIRTH DATE \_\_\_\_/\_\_\_\_/\_\_\_\_

NEXT REVIEW: SKIP SEX: \_\_\_\_\_ RACE: \_\_\_\_\_ EEOC CODE: \_\_\_\_\_

ADDRESS 1: \_\_\_\_\_

ADDRESS 2: \_\_\_\_\_

CITY: \_\_\_\_\_ STATE: \_\_\_\_\_ ZIP CODE: \_\_\_\_\_

HOME PHONE # : (\_\_\_\_) - \_\_\_\_ - \_\_\_\_ USER FIELD 1: \_\_\_\_\_

USER FIELD 2: SKIP LEAVE DATE EMPLOY.: \_\_\_\_/\_\_\_\_/\_\_\_\_

LEAVE TABLE: \_\_\_\_ STATUS: \_\_\_\_ STATUS DATE: \_\_\_\_/\_\_\_\_/\_\_\_\_