

PERSONNEL SERVICES DIVISION  
DEPARTMENT OF EDUCATION

EMPLOYEE INFORMATION SHEET

DIRECTORY INFORMATION:

Employee  
Name:

LAST

FIRST

M.I.

SSN:

Mailing  
Address:

P.O. Box or Street Address

Home Phone Number

City

Zip Code

The above information is considered directory in nature and not subject to prior consent before release.

The following confidential information is solely for the use of the Department of Education and will not be released except upon the expressed written consent of the individual.

\*Home Address if different from Mailing Address:

Street Address

Village

IN CASE OF EMERGENCY CONTACT:

1) \_\_\_\_\_  
Name Relationship

Address

Home Phone #: \_\_\_\_\_ Work Phone #: \_\_\_\_\_

2) \_\_\_\_\_  
Name Relationship

Address

Home Phone #: \_\_\_\_\_ Work Phone #: \_\_\_\_\_

NOTE: Please submit this form to the Personnel Services Division as soon as possible.