

AUGSBURG UNIVERSITY HUMAN RESOURCES INFORMATION FORM

Legal Name <small>(as appears on your Social Security Card)</small>	
Name:	Social Security Number:
Previous Name: <small>(if name change)</small>	Date of Name Change: <small>(if name change)</small>
Home/Permanent Address	
Street Address:	
City, State, Zip Code:	Birthdate:
Home Phone:	Cell/Email/Other:

RACE AND ETHNIC CATEGORY IDENTIFICATION																										
This information is private (as defined by the Minnesota Government Data Practices Act) and will not be released to the public. See reverse side for further information.																										
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EMERGENCY CONTACT INFORMATION	
This form will not be shared, however, the following information will be shared with the Department of Public Safety. Whom shall we contact on your behalf in the case of an emergency?	
Contact Name #1:	
Relationship: (Optional)	Phone Number (Home):
Phone Number (Work):	Phone Number (Cell/Pager):
Address:	
Contact Name #2:	
Relationship: (Optional)	Phone Number (Home):
Phone Number (Work):	Phone Number (Cell/Pager):
Address:	

X

Employee Signature

Date

RACIAL/ETHNIC AND DISABILITY/VETERAN CATEGORIES

Please complete the other side of this form.

Augsburg University is required under certain circumstances to collect Racial/Ethnic Group Information to comply with Federal and State record keeping and reporting requirements pursuant but not limited to Section 503 of the Rehabilitation Act of Amendments of 1974, Title VII of the Civil Rights Act of 1964 and Minnesota Statutes, Section 363.073. Summary data, without names will be reported on the Integrated Post-Secondary Education Data System (IPEDS) and EEO1 reports. This information is private (as defined by the Minnesota Government Data Practices Act) and will not be released to the public. It will only be used in summary reporting format for compliance with Federal and State reporting requirements.

You are requested, but not required, to provide information regarding your racial/ethnic group and disability status; there are no consequences for failing to provide it. Augsburg University may acquire this information by visual survey. This may, however, result in the collection of erroneous information. You are required to provide the other information. Failure to provide the required information (gender, social security number and citizenship status) could result in interruption of your paycheck or benefits or your termination.

DEFINITIONS

RACIAL/ETHNIC CATEGORIES (as defined by the Equal Employment Opportunity Commission-EEOC and Integrated Post-Secondary Education Data System (IPEDS))

Hispanic or Latino - A person of Cuban, Mexican, Puerto Rican, South or Central American, or other Spanish culture or origin regardless of race.

American Indian or Alaskan Native (Not Hispanic or Latino) - A person having origins in any of the original peoples of North America and South America (including Central America), and who maintains cultural identification through tribal affiliation or community attachment.

Asian (Not Hispanic or Latino) - A person having origins in any of the original people of the Far East, Southeast Asia, the Indian Subcontinent, including, for example, Cambodia, China, India, Japan, Korea, Malaysia, Pakistan, and Phillippine Islands, Thailand, and Vietnam.

Black or African American (Not Hispanic or Latino) - A person having origins in any of the black racial groups of Africa.

Native Hawaiian or Other Pacific Islander (Not Hispanic or Latino) - A person having origins in any of the peoples of Hawaii, Guam, Samoa, or other Pacific Islands.

White (Not Hispanic or Latino) - A person having origins in any of the original peoples of Europe, the Middle East or North Africa.

Two or More Races (Not Hispanic or Latino) - All persons who identify with more than one of the above races.

DISABILITY AND VETERAN CATEGORIES (as defined by the Equal Employment Opportunity Commission-EEOC)

Individual with a Disability - An "individual with a disability" means a person who 1) has a physical or mental impairment that substantially limits one or more major life activities; 2) has a record of such impairment, or 3) is regarded as having such an impairment.

Disabled Veteran - (1) A veteran of the U.S. military, ground, naval or air service who is entitled to compensation (or who but for the receipt of military retired pay would be entitled to compensation) under laws administered by the Secretary of Veterans Affairs, or (2) a person who was discharged or released from active duty because of a service-connected disability.

Other Protected Veteran - A veteran who served on active duty in the U.S. military, ground, naval, or air service during a war or in a campaign or expedition for which a campaign badge has been authorized.

Armed Forces Service Medal Veteran - A veteran who, while serving on active duty in the U.S. military, ground, naval or air service, participated in a United States military operation for which an Armed Forces service medal was awarded pursuant to Executive Order 12985.

Recently Separated Veteran - A veteran during the three year period beginning on the date of such veteran's discharge or release from active duty in the U.S. military, ground, naval or air service.