

STATE UNIVERSITY OF NEW YORK
COLLEGE OF ENVIRONMENTAL SCIENCE AND FORESTRY

EMPLOYEE QUESTIONNAIRE

- **New employees** are required to complete this full form, then sign and date at the bottom.
- **Returning employees** are required to fill in name and anywhere changes have occurred, then sign and date at the bottom; **if no changes**, fill in name and **check this box** ☐, then sign and date at the bottom.

Preferred

Salutation Dr. ____ Ms. ____ Mrs. ____ Miss ____ Mr. ____ Female ____ Male ____

Soc. Sec. No. _____ **Date of Birth** Mo. ____ Day ____ Yr. ____

Name _____ **Other Name (if applicable)** _____

Home Address _____ **Home Phone** _____

Permanent Address (if different) _____

Campus Address _____ **Campus Phone** _____

Campus E-mail address (if known) _____

Highest Degree Earned _____ **Year** _____ **Educational Institution** _____

U.S. Citizen Yes ____ No ____ (If no Visa type) _____ **Country of Birth** _____

Previous State Service Yes ____ No ____ If yes State start date _____

Previous SUNY Service Yes ____ No ____ If yes SUNY start date _____

Do you have current or future employment at another State of New York agency, including another SUNY campus?
____ Yes ____ No

Do you have current or future employment at SUNY-ESF through the Research Foundation? ____ Yes ____ No

If yes to either above, list name of employer, position, and percent of time working:

Are you a retiree from another State of New York agency, including another SUNY campus? ____ Yes ____ No

☐ **By checking this box, I understand that while employed at SUNY-ESF it is my responsibility to seek approval through ESF's Human Resources Office for any employment at another State of New York agency, another SUNY campus, and/or employment at SUNY-ESF through the Research Foundation.**

Emergency Notification:

Name _____ **Relationship** _____

Address _____ **Phone** _____

I hereby certify that the above information is true and accurate to the best of my knowledge. I understand that intentional or negligent falsification of the above information and/or information on the attached resume could lead to my dismissal.

Signature

Date