

New Hire Demographic Form



Instructions

- Complete this form once the candidate has accepted the job offer.
Alert! This form cannot be emailed if a social security number is included.

Personal Information

Name:			
SSN #:		UFID:	
DOB:		Passport #:	
Gender:		Citizenship:	
Hire Date:		Marital Status:	

Education Information

Education:	
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Contact Information

Email Address:	
Business Email Address:	
Phone Number:	
Business Phone Number:	

Addresses

Home/Legal Address (In/Out of U.S.)		Mailing/Street Address (Only U.S. Address)	
Line 1		Line 1	
Line 2		Line 2	
City/State		City/State	
County		County	
Zip Code		Zip Code	
Country		Country	

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Business Address (UF address: P.O. Box Address)	
Line 1	
Line 2	
City/State	
County	
Zip Code	
Country	

Departmental Information (Optional)

Department ID:			
Salary Plan:		Position Number:	
Job Code:		FTE:	
Std Hours:		Comp Rate:	
Workgroup:		FICA Status:	
Supervisor ID:			
Notes:			