



Transition Resource Center
 Student Union Building 1, Suite 3600
 4400 University Drive, MS 2C4, Fairfax, Virginia 22030
 Phone: 703-993-9082; Fax: 703-993-9008

Employee Information Sheet

The following information is requested in order to process your appointment at George Mason University. Your department will not be able to enter any information into the Human Resource Information System until this form is completed and received. No payment will be made until this form is completed in full. This information is used for reporting at the university, state, and federal levels.

Name _____ Birthdate _____
 Gnumber/social Security Number _____ Race _____
 Home Address _____

Cell Phone _____ Mason Email _____
 Emergency Contact Name _____ Relationship _____
 Emergency Contact Address _____
 Emergency Contact Phone _____

Citizenship (check one) U.S. Citizen Resident Alien Nonresident Alien
 Country of Citizenship if not a U.S. citizen _____

Are You A Veteran Yes No
 George Mason Student Yes No

If Yes, what level Part Time Full time Undergraduate Graduate
 Do you currently work for the University? Yes No

Signature _____ Date _____

 Department Use Only – Checklist to ensure all documents are completed

- ___ Employee Information Sheet
- ___ Federal I-9 Form Completed
- ___ Federal Tax Forms Completed
- ___ Direct Deposit Form Completed
- ___ Commonwealth's Drug and Alcohol Policy
- ___ Conditions of Employment
- ___ Selective Service Form (males only)
- ___ Resume
- ___ State Tax Forms Completed

Department Verification Signature _____ Date _____