

**CAMBRIDGE PUBLIC SCHOOLS
SUBSTITUTE NEW HIRE: EMPLOYMENT DATA FORM**

Please *print* the following information, writing as clearly as possible to support data and payroll accuracy.

Date of Hire: _____

Employee Name: (Last) _____ (First) _____ (M.I.) _____

Address: _____

Home Phone Number: _____ Cell Phone Number: _____

School Cancellation Phone Number (*number you would like to be reached at between 5:30 and 6:00 a.m.*) _____

E-mail Address _____ Social Security Number: _____

Highest Education Level: _____ Full-time Student? No Yes

Gender: Female Male Marital Status: Single Married

Birth Date: _____ Country of Birth: _____ State of Birth: _____

City of Birth: _____ Citizenship Status: U.S. Citizen? Yes No

Ethnic Group: (check as many as apply)

American Indian/Alaskan Native // Asian // Black/African American // Hispanic/Latino
 Native Hawaiian/Pacific Islander // White

Military Status:

Veteran // No Military Service // Vietnam-Era Veteran // Reserves: Active // Inactive

Handicapped: Yes No

Were you formerly, or are you currently, employed by the City of Cambridge? Yes No

Dates of employment: _____ Department: _____

Emergency Contact Name: _____ Relationship: _____

Home Phone Number: _____ Additional Phone Number: _____

Second Emergency Contact Name: _____ Relationship: _____

Home Phone Number: _____ Additional Phone Number: _____

I hereby certify that the above information is true and accurate:

Signature _____ Date _____

Please return this form to the Cambridge Public Schools, Human Resources Department, 159 Thorndike Street, Cambridge, MA 02141. Thank you.

HUMAN RESOURCES OFFICE USE ONLY

CORI Release Form Employment Data Form
Proof of Citizenship (1-9): Driver's License Passport Social Security Card Birth Certificate
Visa Number: _____ Exp. Date: _____
Certification: Transcripts References
W-4 Tax Withholding Form State Tax Withholding Form Retirement