

Sean W. Bulson, Ed.D., Superintendent of Schools 102 S. Hickory Avenue, Bel Air, Maryland 21014 Office: 410-838-7300 • www.hcps.org • fax: 410-893-2478

Human Resources Office

Office: 410-588-5238 Fax: 410-588-5315

NEW HIRE PERSONAL INFORMATION

Em	ployee ID or last 4 digits of Soci	al Security No.:		
Firs	st Name:	Middle:	Last Name:	
Maiden Name (if applicable):			Preferred Name:	
Dat	te of Birth (optional):			
Email Address:		Prir	Primary Phone:	
<u>GE</u>	<u>NDER</u> : ☐ Male ☐ Female	□ Non-Binary		
<u>ETF</u>	H <u>NICITY:</u> Are you Hispanic or La	tino? 🗆 Yes 🗆 No		
RA	CE IDENTIFICATION:			
Usi	ing the descriptions below, plea	se select the race(s) that you m	ost closely identify with. You must select at least one ra	ace.
	American Indian/Alaska Native: A person having origins in any of the original peoples of North and South America (including Central America), and who maintains tribal affiliation or community attachment.			
	Asian: A person having origins in any of the original peoples of the Far East, Southeast Asia, or the Indian subcontinent including, for example Cambodia, China, India, Japan, Korea, Malaysia, Pakistan, the Philippine Islands, Thailand, and Vietnam.			
	Black or African American: A person having origins in any of the black racial groups of Africa.			
	Native Hawaiian or Other Pacific Islander: A person having origins in any of the original peoples of Hawaii, Guam, Samoa or other Pacific Islands. The term "Native Hawaiian" does not include individuals who are native to the state of Hawaii by virtue of being born there. In addition to Native Hawaiian, Guamanian, and Samoan, this category would include the following Pacific Islander groups reported in the 1990 census: Carolinian, Fijian. Kosraean, Melanesian, Micronesian, North Mariana Islander, Palauan, Papua New Guinean, Ponapean (Pohnpelan), Polynesian, Solomon Islander, Tahitian, Tarawa Islander, Tokelauan Tongan, Trukese (Chuukese), and Yapese.			
	White: A person having origins in any of the original peoples of Europe, the Middle East or North America.			
 <u>EM</u>	 IERGENCY CONTACT INFORMAT	 I <u>ON</u>		
Firs	st Name:	Middle:	Last Name:	
Address:			Relationship:	
City	y/State/Zip Code:			
Но	me Phone:	Work Phone:	Cell Phone:	