LINN-BENTON COMMUNITY COLLEGE

Payroll Information/Add Sheet

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_____ _____ _____

Employee Legal Name Social Security # ID #

_____ _____/_____/_____

Other Names Used (If Applicable) Date of Birth

_____ _____

Mailing Address Permanent Address

_____ _____

City, State Zip City, State Zip

(_____)_____Is your home phone number unlisted? Yes No

Home Phone (Circle One)

(_____)_____ (_____)_____

Business Phone Alternate Phone

Are you currently working for another Oregon PERS employer? _____Yes _____No

Have you ever worked for another Oregon PERS employer? _____Yes _____No

Name of other Oregon PERS employer: _____

FOR STATISTICAL REPORTING ONLY:

Race/Ethnic Group

Are you Hispanic or Latino? _____ Yes _____ No

Optional Race Category (check one)

____ American Indian/Alaska Native
____ Asian
____ Black or African American
____ Native Hawaiian or other Pacific Islander
____ White
____ Two or more races

Gender:

_____ Male
_____ Female

U.S. Citizen:

_____ Yes
_____ No

_____ _____/_____/_____

Signature Date

Revised 9/12