

Return this form to:  
HR Shared Services  
hrservice@syr.edu  
Phone 315.443.4042 Fax 315.443.1063  
Skytop Office Bldg., Suite 101, Syracuse, NY 13244

Syracuse University collects data for a variety of reasons such as the administration of our benefit plans, affirmative action and workforce planning. As an affirmative action/equal employment opportunity employer, the University is required to maintain accurate information about our employees and take affirmative action on behalf of protected veterans and other specified protected groups. The information you submit will be treated confidentially and used consistent with these important objectives and government reporting requirements.

Should you have any questions, please contact Human Resources at [hrservice@syr.edu](mailto:hrservice@syr.edu) or 315.443.4042.

Job Title from Offer Letter: \_\_\_\_\_

**PERSONAL INFORMATION**

\_\_\_\_\_  
SUID Social Security Number Date of Birth\*

\_\_\_\_\_  
Last Name\* Middle Initial\* First Name\*

\_\_\_\_\_  
Current Mailing Address\*

\_\_\_\_\_  
City\* State\* ZIP\*

\_\_\_\_\_  
Primary Personal Phone\* Campus Phone Email

**Sex\*:**  Male  Female  Intersex  Sex not listed; please indicate: \_\_\_\_\_

**Gender:**  Man  Woman  Gender not listed; please indicate: \_\_\_\_\_

**Citizenship\*:**  U.S. Citizen  Permanent Resident  Non-Resident Alien, authorized to work until: \_\_\_\_\_

**Marital Status\*:**  Unmarried  Married  Divorced  Separated  Widowed

**EDUCATION**

Education Level Completed	Major/Degree	Name of Institution
<input type="checkbox"/> Less than High School	_____	_____
<input type="checkbox"/> High School Diploma	_____	_____
<input type="checkbox"/> Technical College	_____	_____
<input type="checkbox"/> Associate's	_____	_____
<input type="checkbox"/> Bachelor's	_____	_____
<input type="checkbox"/> Master's	_____	_____
<input type="checkbox"/> J.D.	_____	_____
<input type="checkbox"/> M.D.	_____	_____
<input type="checkbox"/> Ph.D./Doctoral Degrees	_____	_____

\*Indicates a Required Field

**RACE/ETHNIC GROUP**

**Are you Hispanic or Latino?**

- Yes  No

**What is your race?** (Check all that apply)

- American Indian or Alaskan Native  
 Asian  
 Black or African American  
 Native Hawaiian or Pacific Islander  
 White

**MILITARY INFORMATION**

**What is your United States Armed Forces Status?** If you answer Current Dependent, Not a Veteran or Prefer not to Answer, you do not need to complete the additional questions.

- Currently Serving  Previously Served  Current Dependent  Not a Veteran  Prefer not to answer

**Tell us more about your current service:**

- National Guard  
 On Active Military Duty  
 U.S. Reserves  
 Veteran of U.S. Armed Forces

**Please identify your branch of service** (check all that apply):

- Air Force  
 Army  
 Coast Guard  
 Marine Corps  
 Navy

**Start Date of Service** (earliest date of service): \_\_\_\_\_ MM/DD/YYYY

**End Date of Service** (if applicable): \_\_\_\_\_ MM/DD/YYYY

**Select one of the following** (if applicable):

- Disabled Veteran  
 Other Protected Veteran

**Did you receive an Armed Forces Service Medal?**

- Yes  
 No

**Are you interested in receiving communication and information from the Institute for Veterans and Military Families?**

- Yes  No

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**Signature**

**Date**

**FORM DEFINITIONS:**

**Hispanic or Latino:** A person of Cuban, Mexican, Puerto Rican, South or Central America, or other Spanish culture or origin, regardless of race.

**American Indian or Alaskan Native:** A person having origins in any of the original peoples of North tribal or South America (including Central American) and who maintains tribal affiliation or a 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 Pacific Islander:** A person having origins in any of the original peoples of Hawaii, Guam, Samoa, or other Pacific Islands

**White:** A person having origins in any of the original peoples of Europe, the Middle East, or North Africa.

**Disabled Veteran:** A Veteran who served on active duty in the U.S. military and is entitled to disability compensation (or who but for the receipt of military retired pay would be entitled to disability compensation) under laws administered by the Secretary of Veterans Affairs, or was discharged or released from active duty because of a service-connected disability.

**Other Protected Veteran:** A veteran who served on active duty in the U.S. military during a war, or in a campaign or expedition for which a campaign badge was authorized under the laws administered by the Department of Defense.

**Armed Forces Service Medal:** A veteran who, while serving on active duty in the U.S. military, participated in a U.S. military operation that received an Armed Forces service medal.