

## OAKLAND UNIVERSITY FACULTY INFORMATION FORM

Social Security Number (LAST 4)	Last Name	First Name	Middle Name/Initial
Date of Birth	Sex	Primary Phone Number	Cell Phone Number
	Male      Female		
Current Mailing Address	City	State	Zip Code

**\*When you have determined a permanent residence in the local area, please update your mailing address through SAIL.**

### EMERGENCY CONTACT INFORMATION:

Last Name	First Name	Emergency Phone Number	Relationship to Employee

U.S. Citizen:  Yes  No    If not, what type of visa?     F,  J,  H1,  LAPR,  F2,  J2

Veteran Information (check ALL that apply)	Ethnicity/Race
<p><input type="checkbox"/> <b>Disabled Veteran:</b> a veteran entitled to compensation under laws administered by the Secretary of Veteran Affairs or a person discharged or released from active duty because of a service connected disability</p> <p><input type="checkbox"/> <b>Active Duty Wartime or Campaign Badge Veteran:</b> a veteran that has served on active duty during a war, campaign or expedition for which a campaign badge has been authorized under laws administered by the Department of Defense</p> <p><input type="checkbox"/> <b>Armed Forces Service Medal:</b> a veteran who while serving on active duty participated in a military operation for which an Armed Forces service medal was awarded</p> <p><input type="checkbox"/> <b>Recently Separated Veteran:</b> a veteran during the three year period beginning on the date of such veteran's discharge or release from active duty</p> <p><b>If so what was your date of discharge?</b> _____</p>	<p><b>Are you Hispanic/Latino</b> (A person of Cuban, Mexican, Puerto Rican, Central or South American, or other Spanish cultures of origin, regardless of race): <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p><b>Select one or more of the following racial categories to describe yourself:</b></p> <p><input type="checkbox"/> <b>American Indian or Alaskan Native:</b> A person having origins in any of the original peoples of North and South American (including Central America), and who maintains a tribal affiliation or community attachment</p> <p><input type="checkbox"/> <b>Asian:</b> A person having origins in any of the original peoples of the Far East, Southeast Asia, or the Indian subcontinent including Cambodia, China, India, Japan, Korea, Malaysia, Pakistan, the Philippine Islands, Thailand and Vietnam</p> <p><input type="checkbox"/> <b>Black or African American:</b> A person having origins in any of the black racial groups of Africa</p> <p><input type="checkbox"/> <b>Native Hawaiian or Pacific Islander:</b> A person having origins in any of the original persons of Hawaii, Guam, Samoa or other Pacific Islands</p> <p><input type="checkbox"/> <b>White:</b> A person having origins in any of the original peoples of Europe, North Africa, or the Middle East</p>

### Administrative Policies and Procedures (for review only – do not print)

- [Policy 710 Administrative Guidelines Prohibiting Discrimination](#)
- [Policy 711 Guidelines for Handling Discrimination Complaints](#)
- **Information Technology Policies:** [Policy 830](#); [Policy 850](#); [Policy 860](#); [Policy 870](#); [Policy 880](#); [Policy 890](#)
- [Policy 470 Release of Student Educational Records](#)
- [Policy 406 Conflict of Interest Nepotism](#)
- [Policy 430 Freedom of Information Act](#)

### OATH OF EMPLOYEES OF STATE AND ITS GOVERNMENTAL AGENCIES

State of Michigan County of Oakland

Michigan State law requires that all employees of Oakland University shall, as a condition of employment, take and subscribe to this affirmation:

I do solemnly swear (or affirm) that I will support the constitution of the United States of American and the constitution of the state of Michigan, and that I will faithfully discharge the duties of my position according to the best of my ability.

**I, as an employee of Oakland University, agree to read, understand and comply with the materials and policies listed above.**

Employee Signature \_\_\_\_\_ Date \_\_\_\_\_