

Data Collection Form

for New Faculty

Note: Please download and save the form locally before completing. * Required items are denoted by an asterisk.

Prefix	Legal name for tax purposes	* Previously at Yale? No Yes
First Name	e	If yes, list other names/aliases that you have used:
Middle		
* Last Name	e	Suffix
U.S. Add	dress	
Line 1		
Line 2		
City		* State
Telephone		
Email Ad	ldress	
Email Add	dress	Personal Work
Personal I	Information	
Gender	* Date of Birth	Marital Status
	or Latino No Yes nicity I do not wish to answer can Indian/Alaska Native Asian	Black/African American Native Hawaiian or Other Pacific Islander White
*Citizenship		enter country:
Military Sta	atus (United States of America)	
Active	e Wartime or Campaign Badge Veteran	I am a protected veteran, but I choose not to self-identify the classifications to which I belong
	d Forces Service Medal Veteran	I am NOT a protected veteran
Disab	oled Veteran	Recently Separated Veteran
		* To request a temp SS#, email: employee.services@yale.edu
I	For department use only:	Please be sure to include the following information:
S	Social Security Number* or UPI (if returning to	Name: Date of Birth:
v	Vale)	Reason for request: Department:
Ĺ	Location (building name)	Country of Citizenship:
F	Faculty Mentor or Principal	k to https://your.yale.edu/administrative-services/ ortation/moving-mail-logistics/p-o-box-codes If non-resident - the type of visa: Position: Length of time at Yale: Will they be paid by Yale (regular salary, stipend): fellowship, or
	Investigator name (if applicable)	paid by Accounts Payable)? Is this position required to be entered into Workday?