

**The University of Alabama in Huntsville
Employee Profile**

BANNER ID - (A#)																																
SSN	PRE	FIRST NAME	MI	LAST NAME																												
STREET ADDRESS		CITY, STATE	ZIP	COUNTY																												
BIRTHDATE	HOME PHONE	CELL PHONE	EMAIL ADDRESS																													
Previously employed by UAH: <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, please indicate your employment classification(s): <input type="checkbox"/> FACULTY <input type="checkbox"/> STAFF <input type="checkbox"/> PT/LECTURER <input type="checkbox"/> STUDENT <input type="checkbox"/> GTA/GRA <input type="checkbox"/> OTHER PERSONNEL Are you currently a member of the Teachers' Retirement System of Alabama? <input type="checkbox"/> YES <input type="checkbox"/> NO If yes, please list the name of the employing agency: _____																																
SEX	MARITAL STATUS	ETHNICITY/RACE																														
<input type="checkbox"/> MALE <input type="checkbox"/> FEMALE	<input type="checkbox"/> SINGLE <input type="checkbox"/> MARRIED <input type="checkbox"/> DIVORCED <input type="checkbox"/> SEPARATED <input type="checkbox"/> WIDOWED	Are you Hispanic or Latino? <input type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> AMERICAN INDIAN OR ALASKA NATIVE <input type="checkbox"/> NATIVE HAWAIIAN OR OTHER PACIFIC ISLANDER <input type="checkbox"/> ASIAN <input type="checkbox"/> WHITE <input type="checkbox"/> BLACK OR AFRICAN AMERICAN																														
DISABILITY STATUS		MEDICAL LIMITATIONS																														
<input type="checkbox"/> NONE <input type="checkbox"/> SPEECH <input type="checkbox"/> WHEELCHAIR <input type="checkbox"/> LEARNING <input type="checkbox"/> SEMI-AMBULATORY <input type="checkbox"/> MENTAL/PSYCHOLOGICAL <input type="checkbox"/> SIGHT <input type="checkbox"/> COORDINATION <input type="checkbox"/> HEARING <input type="checkbox"/> OTHER _____		<input type="checkbox"/> NONE <input type="checkbox"/> HEART CONDITION <input type="checkbox"/> BLIND <input type="checkbox"/> PARAPLEGIC <input type="checkbox"/> CARDIOPULMONARY STRESS <input type="checkbox"/> PROSTHETIC LIMB <input type="checkbox"/> DIABETIC <input type="checkbox"/> QUADRIPLEGIC <input type="checkbox"/> EPILEPTIC <input type="checkbox"/> NO HEAVY LIFTING <input type="checkbox"/> HEARING IMPAIRED <input type="checkbox"/> NO CHEMICAL INHALATION <input type="checkbox"/> OTHER _____																														
VETERAN STATUS - SEE PAGE 2 FOR DEFINITIONS		MILITARY RESERVE STATUS																														
<input type="checkbox"/> VIETNAM VETERAN ONLY <input type="checkbox"/> BOTH VIETNAM AND OTHER ELIGIBLE VETERAN <input type="checkbox"/> OTHER PROTECTED VETERAN ONLY <input type="checkbox"/> SPECIAL DISABLED		<input type="checkbox"/> NOT IN RESERVE <input type="checkbox"/> ACTIVE RESERVE SEPARATION DATE: _____ <input type="checkbox"/> INACTIVE RESERVE <input type="checkbox"/> INACTIVE RESERVE SUBJECT TO CALL UP																														
CITIZENSHIP/COUNTRY		NON-US CITIZEN MUST ENTER INFORMATION BELOW:																														
<input type="checkbox"/> USA <input type="checkbox"/> OTHER _____		VISA TYPE _____ EXPIRATION DATE _____ ADMISSION NUMBER _____																														
EMERGENCY CONTACTS		EDUCATION																														
PRIMARY NAME _____ ADDRESS _____ RELATIONSHIP _____ TELEPHONE # 1 _____ - _____ TELEPHONE # 2 _____ - _____		HIGHEST DEGREE AWARDED _____ DEGREE DATE(MM/DD/YY) _____ DEGREE INSTITUTION _____ INSTITUTION LOCATION (City/State) _____ MAJOR _____																														
SECONDARY NAME _____ ADDRESS _____ RELATIONSHIP _____ TELEPHONE # _____ - _____ - _____		DEPENDENTS <p align="center">LIST DEPENDENT CHILDREN THAT ARE UNMARRIED, LESS THAN AGE 26.</p> <table border="1" style="width:100%; border-collapse: collapse;"> <thead> <tr> <th></th> <th>NAME</th> <th>SEX</th> <th>DATE OF BIRTH</th> </tr> </thead> <tbody> <tr> <td>SPOUSE</td> <td>_____</td> <td>M F</td> <td>_____</td> </tr> <tr> <td>CHILD</td> <td>_____</td> <td>M F</td> <td>_____</td> </tr> <tr> <td>CHILD</td> <td>_____</td> <td>M F</td> <td>_____</td> </tr> <tr> <td>CHILD</td> <td>_____</td> <td>M F</td> <td>_____</td> </tr> <tr> <td>CHILD</td> <td>_____</td> <td>M F</td> <td>_____</td> </tr> <tr> <td>CHILD</td> <td>_____</td> <td>M F</td> <td>_____</td> </tr> </tbody> </table>				NAME	SEX	DATE OF BIRTH	SPOUSE	_____	M F	_____	CHILD	_____	M F	_____	CHILD	_____	M F	_____	CHILD	_____	M F	_____	CHILD	_____	M F	_____	CHILD	_____	M F	_____
	NAME	SEX	DATE OF BIRTH																													
SPOUSE	_____	M F	_____																													
CHILD	_____	M F	_____																													
CHILD	_____	M F	_____																													
CHILD	_____	M F	_____																													
CHILD	_____	M F	_____																													
CHILD	_____	M F	_____																													
		HRS USE ONLY: Banner																														
		Entered: _____ I-9 Completed: _____																														
SIGNATURE _____		Adj Srvc Dte: _____																														
DATE _____		Revised 06/5/2015																														

Veteran of the Vietnam-era means a person who (i) served on active duty in the U.S. military, ground, naval or air service for a period of more than 180 days, and who was discharged or released therefrom with other than a dishonorable discharge, if any part of such active duty was performed (A) in the Republic of Vietnam between February 28, 1961 and May 7, 1975, or (B) between August 5, 1964 and May 7, 1975, in all other cases, or (ii) was discharged or released from active duty in the U.S. military, ground, naval or air service for a service-connected disability if any part of such active duty was performed (A) in the Republic of Vietnam between February 28, 1961 and May 7, 1975, or (B) between August 5, 1964 and May 7, 1975, in any other location.

Special Disabled Veterans means (i) a veteran of the U.S. military, ground, naval or air service who is entitled to compensation (or who but for the receipt of military retired pay would be entitled to compensation) under laws administered by the Department of Veterans' Affairs for a disability (A) rated at 30 percent or more, or (B) rated at 10 or 20 percent in the case of a veteran who has been determined under Section 38 U.S.C. 3106 to have a serious employment handicap or (ii) a person who was discharged or released from active duty because of a service-connected disability.

Newly Separated Veterans means any veteran who served on active duty in the U.S. military, ground, naval or air service during the one year period beginning on the date of such veteran's discharge or release from active duty.

Other Protected Veterans means veterans who served on active duty in the U.S. military, ground, naval or air service during a war or in a campaign or expedition for which a campaign badge has been authorized. For those with internet access, the information required to make this determination is available at <http://www.opm.gov/veterans/html/vgmedal2.asp>.