

PLANO INDEPENDENT SCHOOL DISTRICT

Employee Information Sheet

(Please Print)

Name: \_\_\_\_\_
First MI Last

Social Security Number: \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_ Birthdate: \_\_\_\_\_ Gender: Male/Female (circle one)

Ethnicity (select one): Hispanic/Latino (4) \_\_\_\_\_ Not Hispanic/Latino \_\_\_\_\_

Race (select all that apply): Black or African American (3) \_\_\_\_\_ American Indian or Alaska Native (1) \_\_\_\_\_
Asian (2) \_\_\_\_\_ White (5) \_\_\_\_\_ Native Hawaiian/ Other Pacific Islander (6) \_\_\_\_\_

In case of an emergency notify: \_\_\_\_\_

Relationship \_\_\_\_\_ Phone Number \_\_\_\_\_

I understand the information I am providing about gender, age and race/ethnicity will not be used to determine eligibility for employment or promotion, but will be used solely for the purpose of employee record information.

Are you related to a person who is currently serving as a member of the Board of Trustees for Plano ISD? Yes \_\_\_\_\_ No \_\_\_\_\_

Are you a former PISD Employee? Yes \_\_\_\_\_ No \_\_\_\_\_ If yes, former position at PISD \_\_\_\_\_
Resignation date: \_\_\_\_\_

Have you retired through TRS? Yes \_\_\_\_\_ No \_\_\_\_\_

I confirm that the above information is complete and accurate to the best of my knowledge.

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

Release of Personal Information Pursuant to the Texas Public Information Act

Section 552.024 of the Government Code provides that employees and former employees of Plano ISD may choose whether to allow public access to personal information including: (1) home address, (2) home telephone number, (3) social security number, and (4) information that reveals whether the person has family members.

Note: Although the above information may be restricted from public access, it may still be used by the district for legitimate business reasons.

After checking your choices below, please sign and date this form and return to employee records staff at your new hire meeting.

Yes, please secure the following personal information from public access: (1) home address, (2) home telephone number, (3) social security number, and (4) information that reveals whether I have family members.

Name (please print) Soc. Sec. #

Home Phone Number

Signature Date

OR

No, please do not restrict public access to my personal information.

Name (please print) Soc. Sec. #

Home Phone Number

Signature Date