HARTNELL COLLEGE

DATA SHEET FOR RETURNING ADJUNCT INSTRUCTOR

Human Resources & Equal Employment Opportunity

☐ Dr.
☐ Mr.
☐ Ms. _____
Last Name First Name MI

Address: _____

☐ New Address Street

_____
City State Zip

Home Phone: _____ E-Mail Address: _____

Social Security #: _____ Birth Date: _____ Sex: ☐ Female ☐ Male

Semester you will be teaching: Fall 20_____ Spring 20_____ Summer 20_____

AREA

☐ Fine Arts/Social Science/Language Arts
☐ Math/Science/AHT
☐ Nursing
☐ Physical Education
☐ Occupational Education
☐ King City Center
☐ Student Services
☐ Library
☐ ALC
☐ Counseling
☐ Theatre Arts

	Yes	No
Have you ever been dismissed from employment or resigned in lieu of being dismissed for inefficiency, delinquency, or misconduct? If "yes" explain on a separate sheet of paper.	☐	☐
Does Hartnell College employ a relative of yours? If "yes" list name and Relationship:	☐	☐
I hereby certify that all statements made above are true and complete to the best of my knowledge. I understand that any false, incomplete or incorrect statement may result in my dismissal from employment with the Hartnell College Community District.		
Signature:	Date:	

RETURN WITH THE FOLLOWING FORMS - DEPARTMENT USE ONLY

☐ Employee's Withholding Allowance Certificate *(Form W-4)*
☐ Copy of Social Security Card
☐ Physician Designation Form (HR-20)
☐ STRS Permissive Election and Acknowledgment of Receipt of CALSTRS Defined Benefit Plan Membership Information *(Form ES 350)*
☐ Statement Concerning Your Employment in a Job Not Covered by Social Security *(Form SSA-1945)*

Payroll ___/___/___
Access __/___/___
MCOE ___/___/___
Datatel ___/___/____