

McDaniel College
Human Resources Adjunct Demographic Form

Please Type or Print Clearly

(Circle one) Title: Dr. Mr. Ms. Mrs. or _____ Other last names used (maiden): _____

Name: _____

First

Middle

Last

Home Address: _____

Number Street Apartment _____

City

State

County

Zip

S.S.#: _____ Nickname: _____ Male/Female _____

Cell Telephone: (____) _____ Home Phone (____) _____

Circle Marital Status: Married/Single/Partnered/Divorced/Widowed Date of Birth: _____

Race/Ethnic Origin: American Indian Black (African American)

White (Caucasian) Hispanic

Asian/Pacific Islander _____ Multi-Ethnic

Non-resident Alien ___Yes ___No Handicap/Disability: Vietnam Veteran: _____

EDUCATIONAL INFORMATION:

Professional License / Certificate _____

College/University Please list all degrees _____

Degree/Institution

State

Year

Degree/Institution

State

Year

Degree/Institution

State

Year

EMPLOYMENT INFORMATION:

Hire Date: Semester/Year: _____ Undergraduate Adjunct or Graduate Adjunct

Circle Current Employment Status

Emergency Contact Persons:

(____) _____
Phone Number

(____) _____
Phone Number

Name & Relationship

Name & Relationship

Signature

Date

Authorization to Serve as Agent of McDaniel College for Purposes of Completing the I-9 Employment Verification Form

This letter serves as written authorization by McDaniel College for you to serve as the College's agent and representative solely for the purpose of reviewing, verifying and completing the attached I-9 Employment Verification Form.

In particular, you agree to serve as the College's agent and representative for such purpose and will review the I-9 Form, assure that the employee fully completes and signs Sections 1 of the Form and that you will also complete Sections 2 of the Form. You must verify that you have personally examined the original documents presented by the employee to establish the employee's identity and employment eligibility, and that those original documents appear to be genuine. You should make copies of all such documents presented by the employee and fully complete and sign the Certification in Section 2 of the I-9 Form.

Also enclosed is a brief summary of the types of documents that are acceptable and other information regarding the preparation of an I-9 Form. You agree to properly complete the I-9 Form in accordance with its instructions and this guidance, and contact the College (**410-857-2205**) if you have any questions about this process or the completion of a specific I-9 Form.

You should forward the fully-executed I-9 Form and this signed letter with the ID photocopies to the Office of Human Resources, McDaniel College, 2 College Hill, Westminster, MD 21157.

Thank you for your assistance to the College.

I acknowledge and agree to serve as agent and representative of McDaniel College for the sole purpose of reviewing, verifying, and completing I-9 Forms, as my be necessary, from time to time.

Signature of Notary Date

TGS/bh

4/09

The following forms must be completed. Scroll down for more information.

Use the following links to access them.

Federal Form I-9/Employment Eligibility Verification <http://www.uscis.gov/files/form/i-9.pdf>

Maryland Tax form http://forms.marylandtaxes.com/current_forms/MW507.pdf

Federal Tax Form <http://www.irs.gov/pub/irs-pdf/fw4.pdf?portlet=3>

*Mail all the completed forms back to the College along with your signed contract letter.