

## PERSONAL DATA FORM University of Nevada, Las Vegas

Employee: Please provide the following information which will be used for Workday data entry purposes.

AA: Do not attach to the hire process in Workday. Secure confidentially or shred after Workday processing.

Last (Family) Name

**EMPLOYEE PERSONAL CONTACT INFORMATION** 

**Legal Employee Name** 

 $\square$  White

First (Given) Name

Home Address	*	Street Address		City, State	Zip Code
(PO Box addresses n	ot permitted)				
Phone and Ema	il	Phone Number	Mobile	Personal Email	
			Landline		
*Mailing address is confidential with the exception that home address of all new or rehired employees is reported to the					
State of Nevada Department of Employment, Training and Rehabilitation in accordance with NRS 606.120.					
AFFIRMATIVE ACTION INFORMATION					
By Federal mandate this institution collects and maintains the data below.					
Definitions: https://www.dol.gov/agencies/vets/programs/fcp/federal contractor program fs					
Additionally, each NSHE institution shall collect sex, gender identity, and sexual orientation information as required by Nevada Revised Statutes					
(NRS) 239B (as amended by SB109, Chapter 489, Statutes of Nevada 2021). Institutions shall use the following format to collect such data whenever					
race and ethnicity data are collected, including on all written and online applications for admission and employment as follows:					
What sex is assigned on your birth certificate? (select one)					
Female					
Gender X (defined as Indeterminate/Intersex/Unspecified)					
Male					
Additional information on sexual orientation, gender identity, and pronouns may be provided by the employee during onboarding in Workday.					
-	ММ	DD	YYYY	, , , , ,	
Date of Birth					
Are you Hispanic or Latino?					
A person of Cuban, Mexican, Puerto Rican, South or Central American or other Spanish culture or origin, regardless of race.					
'	Yes	No	·	6 / 6	
Racial Category or Categories: Please select the category(ies) with which you most closely identify (check as many as apply).					
☐ American Indian or Alaska Native					
☐ Asian					
☐ Black or African American					
☐ Native Hawaiian or Other Pacific Islander					

MI (Optional)