Lamar State College - Port Arthur

A Member of The Texas State University System

With few exceptions, you have the right to request, receive, review and correct information about yourself collected using this form.

New Employee Data

The Information collected in this form is treated as highly confidential. It is used for statistical purposes to assist you in the transfer of benefit entitlements related to prior state service and/or for obtaining services in a medical emergency. Your cooperation in completing the data is appreciated.

NAME: _____ _____
(First) (Middle) (Last) (Suffix)

ADDRESS: _____ PHONE:_____

CITY:_____STATE:_____ZIP CODE:_____

SSN:_____ DEPARTMENT:_____ DEPT. PHONE:_____

Marital Status: ☐ Married ☐ Single
Gender: ☐ Male ☐ Female
Birthdate: _____

Do you have a **disability**? ☐ Yes ☐ No
If **Yes**, please state the disability, and any accommodations that may be necessary for you to perform the essential duties of your position:_____

Race/Ethnicity: Are you Hispanic or Latino? ☐ Yes ☐ No
Please select the race(s) you identify with: Check all that apply
☐ American Indian or Alaska Native ☐ Asian ☐ Black or African American
☐ Native Hawaiian or Other Pacific Islander ☐ White ☐ Unknown

Veteran Status:
☐ Not a Veteran ☐ Vietnam-Era Veteran
☐ Veteran ☐ Armed Forces Services Medal Veteran
☐ Disabled Veteran ☐ Other Protected Veteran
☐ Special Disabled Veteran
☐ Newly/Recently Separated Veteran (3 years)

Military Reserve:
☐ Active
☐ Inactive Reserve (Recall)
☐ Inactive Reserve (No Recall)

Education Level
☐ 1 – Less than high school
☐ 2 – High School/GED
☐ 3 – Associate Degree
☐ 4 – Baccalaureate Degree
☐ 5 – Masters Degree
☐ 6 – Doctoral Degree

EMERGENCY NOTIFICATION: In the event of an emergency I authorize the following contact:

Name:_____ Relationship:_____
Telephone number:_____

PRIOR RELATIONSHIP WITH LAMAR STATE COLLEGE – PORT ARTHUR: Have you had a relationship with LSC-PA as an employee, student or vendor? ☐ Yes ☐ No

PRIOR STATE SERVICE: Do you have any prior service with LSC-PA or with any Texas College or University or State Agency? ☐ Yes ☐ No

Are you **transferring** to LSC-PA directly from another Texas State Agency, University or College?
☐ Yes ☐ No
If Yes, please answer the following:
A. Date of separation from previous Agency: _____
B. List any Tax Deferred Annuities in effect (amount and company/vendor)

Are you currently participating in **TRS**? ☐ Yes ☐ No
If Yes, through which educational institution?

Are you currently receiving a TRS Annuity? ☐ Yes ☐ No If Yes, Date of Retirement: _____

Are you currently receiving an ERS Annuity? ☐ Yes ☐ No If Yes, Date of Retirement:_____

RELEASE OF PERSONAL INFORMATION

The Texas Government Code Section 552.024, provides you the option of prohibiting public access to your home address, home phone number, social security number, information that reveals whether you have family members during and after employment, and emergency contact information. This information is subject to release if requested under the Texas Public Information Act, unless otherwise specified.

Home Address	☐ Yes- Release to Public	☐ No- Do Not Release To Public
Home telephone number	☐ Yes- Release to Public	☐ No- Do Not Release To Public
Social Security number	☐ Yes- Release to Public	☐ No- Do Not Release To Public
Information that reveals if I have family members	☐ Yes- Release to Public	☐ No- Do Not Release To Public
Emergency contact information	☐ Yes- Release to Public	☐ No- Do Not Release To Public

Student employees please note: By selecting this option no information will be released, including but not limited to degrees or awards received, and your name will not be published in press releases or graduation publications.

Have you ever worked as a **commissioned peace officer** or for the **Texas Dept. of Criminal Justice (TDCJ)?**
☐ **Yes** ☐ **No**
If Yes, your records will be marked as DO NOT RELEASE per the Public Information Act (PIA) protecting current and former peace officers, security officers and TDCJ employees from the release of their home address, home telephone number, and Social Security Number. (Texas Government Code Ann 552.1175 and 552.132(f)., Senate Bill 1388)

EMPLOYEE CRIME VICTIM IDENTIFICATION ELECTION

Due to a change in the law, state agencies have more authority to protect information about employees from public access. TEXAS GOVERNMENT CODE 522.132(f) allows state employees to elect to withhold information that would identify or tend to identify them as crime victims. If the media or other public entities request an employee's picture or other identifying information because the employee was a crime victim, the employee may elect to withhold such information. Please check the appropriate statement below to indicate your election:

☐ **DO NOT ALLOW** public access to information that would identify or tend to identify me as a crime victim, including my photograph or any other visual representation of me.

☐ **ALLOW** public access to personal information that would identify or tend to identify me as a crime victim, including my photograph or any other visual representation of me.

I have read and understand this material and I certify that the information provided by me is true and correct to the best of my knowledge. This document is executed in good faith.

I understand that I may request reasonable accommodation for any disability that may arise.

_____ _____
Signature of Employee Date

_____ _____
Signature of Human Resources Representative Date