

**CLEVELAND STATE COMMUNITY COLLEGE**

P.O. Box 3570, 3535 Adkisson Drive  
Cleveland, TN 37320-3570  
(423) 472-7141

*PLEASE PRINT* the information requested below. This is for our personnel and payroll files.

**PERSONNEL INFORMATION**

Last Name \_\_\_\_\_ First Name \_\_\_\_\_ Middle Name \_\_\_\_\_

Social Security Number/Banner ID \_\_\_\_\_

Address: \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

Phone \_\_\_\_\_ Birth Date: Month \_\_\_\_\_ Day \_\_\_\_\_ Year \_\_\_\_\_

Sex: Male \_\_\_\_\_ Female \_\_\_\_\_

Marital Status: Single \_\_\_\_\_ Married \_\_\_\_\_ Widowed \_\_\_\_\_ Divorced \_\_\_\_\_

Veteran Status: Yes \_\_\_\_\_ No \_\_\_\_\_

**Ethnicity/Race:**

1. Do you consider yourself to be Hispanic/Latino/Spanish origin? Yes \_\_\_\_\_ No \_\_\_\_\_

2. In addition, select one or more of the following racial categories to describe yourself:

White \_\_\_\_\_ Black or African American \_\_\_\_\_ Asian \_\_\_\_\_ American Indian \_\_\_\_\_ Alaska Native \_\_\_\_\_

**Bank Account Information for Direct Deposit**

DEPOSITORY (BANK) NAME \_\_\_\_\_

BANKTRANSIT/ABANO. \_\_\_\_\_ ACCOUNT NO \_\_\_\_\_

\_\_\_\_\_ Checking \_\_\_\_\_ Savings