

**Southeastern California Conference  
NEW STUDENT EMPLOYEE DATA COLLECTION**

Name \_\_\_\_\_

Home Address \_\_\_\_\_  
\_\_\_\_\_

Home Phone (\_\_\_\_\_) \_\_\_\_\_

Grade \_\_\_\_\_ Name of School \_\_\_\_\_

Sex:  Male  Female

Ethnic:  Black  Pacific Isl./Asian  White  Hispanic  American Indian

Birthdate \_\_\_\_\_ Age \_\_\_\_\_

Social Security Number \_\_\_\_\_

\_\_\_\_\_  
*Employee Signature* *Date*

**The following document MUST accompany this form:**

- I-9 Form
- W-4 Form
- Copy of Social Security card
- Work Permit

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**(FOR BUSINESS OFFICE USE ONLY)**

Beginning date \_\_\_\_\_ Ending date \_\_\_\_\_

Rate per hour \$ \_\_\_\_\_

Job Duties: (Please mark one)  Clerical  Custodial/Maintenance  Other \_\_\_\_\_  
(Specify)

\_\_\_\_\_  
Signature of School Official *Date*