## HAZLETON AREA SCHOOL DISTRICT PERSONNEL DATA SHEET

PLEASE PRINT CLEARLY	
SOCIAL SECURITY NUMBER	
FULL NAME	
ADDRESS	
CITY/STATE/ZIP	
BIRTH DATE	
AREA CODE/PHONE NUMBER ( )	LISTED UNLISTED
NAME OF CITY, BORO, TOWNSHIP WHERE EARNED INCOME TAXES ARE PAID	
Have you paid your OPT/EMST Tax for the current year	YesNo
POSITION YOU ARE APPLYING FOR	FULL TIME PART TIME
BOARD APPROVAL DATE F	FIRST DAY OF WORK
DEGREE PRESENTLY HELD	
SPOUSE INFORMATION: NAME	
SOCIAL SECURITY #	DATE OF BIRTH
EMERGENCY CONTACT INFO.: NAME	
RELATIONSHIP	PHONE #
CURRENTLY PSERS RETIRE EMPLOYEEY	ESNO DATE RETIRED:
OFFICE USE ONLY	
	# OF DEDENIDENTE
MARITAL STATUS	
EIT CODE OPT/EMST CODE RETIRE CODE JOB CODE	