



PERSONNEL INFORMATION SHEET

Social Security Number: _____ - _____ - _____

Name: _____
Last First Middle Initial

Address: _____
Street
City State Zip County

Telephone Number: () _____ - _____ Gender: _____ Male _____ Female

Date of Birth: _____ Retired from OPERS: ___ No ___ Yes

Marital Status: ___ Married ___ Single ___ Separated ___ Divorced

Education: ___ High School/GED ___ Certificate ___ Some College/No Degree
___ Associate Degree ___ Bachelor's Degree ___ Master's Degree ___ Doctoral Degree

EMERGENCY CONTACT INFORMATION

Name of Contact: _____

Relationship to Employee: _____

Address: _____

Telephone Number: () _____ - _____

SHERIFF EMPLOYEE USE ONLY
Mother's Maiden Name:
Father's Name:

Employee's Signature: _____ Date: _____

HR USE ONLY			
SAP #:		DATE OF HIRE:	
POSITION #:		(SHRF) BADGE #:	
JOB #:		(SHRF) BAR CODE#:	