

EMPLOYEE DEMOGRAPHIC

**Social Security#:** \_\_\_\_\_

**Name:**         *first*                                 *middle*  
\_\_\_\_\_

*last*                                 *maiden name*  
\_\_\_\_\_

**Address:**         *Street/PO Box*                                 *city*  
\_\_\_\_\_

*state*                                 *zip*  
\_\_\_\_\_

**Sex:** \_\_\_\_\_         **Marital stat:** \_\_\_\_\_

**DOB:** \_\_\_\_\_         **Driver's License:** \_\_\_\_\_         **ST.:** \_\_\_\_\_

**Phone:** \_\_\_\_\_         **Cell:** \_\_\_\_\_

**E-mail:** \_\_\_\_\_

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date