

OFFICE OF HUMAN RESOURCE ADMINISTRATION

NAME _____ SS # _____

PLEASE COMPLETE ONLY THE INFORMATION YOU WANT TO UPDATE

Home Address: _____

Mailing Address: _____

Campus Address: _____

(Department, Building, & Room #)

Circle Proper Code

Veteran Code:

- Not a Veteran 0
- Non War Veteran 1
- War Veteran 2
- Disabled War Veteran 3
- Vietnam Era Veteran 4
- Disabled Vietnam Era Veteran 5
- Other Eligible Veterans 6

Marital Status:

- Single 1
- Married or Separated 2
- Divorced 3
- Widowed 4

(If changing your name, a USP-2 form must be completed)

Spouse's Social Security # _____

Spouse's Name _____

Spouse's Date of Birth _____

Education:

NOTE: See reverse side for education list and indicate grade of degree code only.

Employee's Signature

Date

PLEASE NOTE: IF YOU HAVE SAVINGS BONDS, PLEASE CONTACT EMPLOYEE BENEFITS AT 4-9054, TO COMPLETE AN ADDITIONAL FORM.

Return this form to the Office of Human Resource Administration.

4/00

WAR VETERAN CODE

12-07-41 to 12-31-46	World War II
06-27-50 to 01-31-55	Korean War
08-05-64 to 05-07-75	Vietnam
08-24-82 to 07-31-84	Lebanon/Grenada
12-20-89 to 01-31-90	Panama
08-02-90 to	Desert Storm

Attach a copy of your DD-214 and proof of disability from the VA if applicable.

EDUCATION CODE LIST

Code #	Educational Achievement
09	Completed ninth grade or under
10	Completed tenth grade
11	Completed eleventh grade
12	Graduated High School
13	High School Equivalent
14	Completed one year college
15	Completed two years college
16	Completed three years college
17	College Graduate - Bachelor of Arts
18	College Graduate - Bachelor of Science
19	College Graduate - Bachelor of Law
20	Two Bachelor Degrees
21	Master of Arts Degree
22	Master of Science Degree
23	Master of Business Administration
24	Master of Public Health
25	Master of Public Administration
26	Master of Social Work
27	Master of Hospital Administration
28	Two Masters Degrees
29	Doctor of Juris
30	Doctor of Philosophy
31	Dentist
32	Doctor of Veterinary Medicine