

**Herscher School District #2**

**501 N. Main St. PO Box 504**

**Herscher, IL 60941-0504**

**Employee Information Form**

Please complete the following information relating to your current status. Anytime this information changes please notify the unit office.

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Name	First	Middle	Last
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Address	Street	City	State	Zip
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Social Security #	Telephone #	Birthday
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**EMERGENCY CONTACT INFORMATION:**

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Emergency Contact	Phone #	Relation to you
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Emergency Contact	Phone #	Relation to you
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Is there any information you would like to provide in case of an emergency? Ex. allergies

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**LEGAL INFORMATION:**

Have you ever been convicted of any crime involving a sex offense or a controlled substance, including a DUI, ether a felony or not, which as not been sealed or expunged?

Check one

Yes     No

If yes, explain – giving dates: \_\_\_\_\_