DEPARTMENT OF ELECTRICAL AND COMPUTER ENGINEERING

Personal Information Form (Please print legibly)

First Name _____ Last Name _____

Social Security Number _____ Birth Date _____

Street Address _____

City _____ State _____ Zip Code _____

Email Address: _____ Home and/or Cell Phone _____

Gender _____ Ms.,Miss, Mr., Mrs.? _____ Martial Status: _____

Emergency Contact: _____
Name

Phone Number _____ Relationship _____

Street Address _____ City _____

State _____ Zip Code _____

Citizenship: _____

If you are not an US Citizen or resident alien, what is your visa type: _____

Race/Ethnic Background: U.S. Citizens/Permanent Residents Only;
(The U.S. Dept. of Education requires all universities to request information from U.S. Citizens or Permanent Residents. This information is for statistical purposes only.)

Native American Indian or Alaskan Native _____ Black or African American _____
Asian American, Pacific Islander or Indian _____ Caucasian _____
Mexican American, Puerto Rican, Latin American or other Hispanic _____

Other _____