

**BANNER FACULTY INFORMATION**

**Instructions:** Discipline must be included on new forms. If update, enter only SSN, Name and change.

**Please highlight change.**

SSN

New  Update

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**NAME:** \_\_\_\_\_

(LAST, FIRST MIDDLE)

**STARTING TERM:** \_\_\_\_\_ **YEAR:** \_\_\_\_\_ **FT** \_\_\_\_\_ **PT** \_\_\_\_\_

**GENDER:** \_\_\_\_\_

**BORN:** \_\_\_\_\_  
MM/DD/YY

**COUNTRY OF CITIZENSHIP:** \_\_\_\_\_  
If not a US Citizen, check one: Per Res: \_\_\_\_\_ Need Visa \_\_\_\_\_  
(Contact HR as soon as possible if Visa needed)

**ETHNIC:** (Circle One) 1-WHITE; 2-BLACK; 3-HISPANIC;  
4-ASIAN; 5-AMER INDIAN;

**TENURE:** 1-TENURED 2-ON TENURE TRACK 0- NOT ELIGIBLE FOR TENURE  
(Circle One)

**RANK:** If Change, effective Semester \_\_\_\_\_ and Year \_\_\_\_\_

(Circle One) PROF ASST INST VISITING LIBR ADJ  
ASST PROFESSIONAL ASSOC PROFESSIONAL SENIOR PROFESSIONAL GRAD ASST TCHG

**Discipline:** \_\_\_\_\_

<b>COLLEGE:</b> (Circle One)	AS	BA	ED	NH	UC	<b>OTHER</b>
<b>DEPT:</b> (Circle One)	BS BC	IBFS	CI	NURS	DEVS	CE
	EMAP FPA	IBTS	PPRO			KL
	LL SSC		TCHP			ILI

**EARNED DEGREE FROM DATE CONFERRED**


**DEGREE IN PROGRESS FROM EXPECTED DATE**


**COMMENTS:**

**FORM COMPLETED BY:** \_\_\_\_\_ **DATE** \_\_\_\_\_

\*\*\*\*\*FOR IR USE ONLY\*\*\*\*\*

Date entered on Banner: \_\_\_\_\_

By: \_\_\_\_\_

Banner ID: \_\_\_\_\_

(revised 08/01/11-FAC INFO. BANNER)