



PERSONAL DATA FORM

Last Name: _____ First Name: _____ Middle Initial: _____

Social Security Number: _____

Home Address: _____

City: _____ State: _____ Zip Code: _____

Mailing Address (*if different*): _____

City: _____ State: _____ Zip Code: _____

Contact Number: _____ Date of Birth: _____

Marital Status: _____ Marital Status Date: _____

Military Status: _____

Education

College Name (1): _____

Complete Mailing Address: _____

Years Completed: _____ Major/Degree: _____

College Name (2): _____

Complete Mailing Address: _____

Years Completed: _____ Major/Degree: _____

Professional School/Other Name: _____

Complete Mailing Address: _____

Years Completed: _____ Major/Degree: _____

High School Name: _____

Complete Mailing Address: _____

Years Completed: _____ Major/Degree: _____



EMERGENCY CONTACT INFORMATION

First Contact:

Last Name: _____ First Name: _____ Middle Initial: _____

Relationship: _____

Home Address: _____

City: _____ State: _____ Zip Code: _____

Contact Number: _____ Email Address: _____

Second Contact:

Last Name: _____ First Name: _____ Middle Initial: _____

Relationship: _____

Home Address: _____

City: _____ State: _____ Zip Code: _____

Contact Number: _____ Email Address: _____



EMERGENCY EVACUATION ASSISTANCE

CONFIDENTIAL

In order to maintain evacuation procedures for all facilities, we need to determine whether or not any staff members or students would require assistance in an emergency evacuation. Please be assured that this information will only be used for emergency evacuation purposes and will only be shared with those who have responsibilities under the emergency evacuation plan.

I would require assistance during an evacuation: Yes No

Type of Assistance: _____

Employee Last Name: _____

Employee First Name: _____

Title: _____ Office Contact Number: _____

Department: _____

Location: _____

Name of Direct Supervisor: _____



AUTHORIZATION TO RELEASE REFERENCE INFORMATION

Name of Candidate: _____

Position Sought: _____ College: _____

I have applied for a position with The City University of New York (CUNY) and would like CUNY to be fully informed of my qualifications for the position. I hereby authorize any current or former employer, professional reference, and education/training provider, to disclose in good faith any information they may have regarding and pertaining to my qualifications and fitness for employment.

I agree to hold such employers, references, educational/training institutions and any other persons giving references harmless from liability or damages for providing the requested information.

A photocopy or fax of this authorization shall be as valid as the original.

Signature: _____ Date: _____



STATEMENT OF CITIZENSHIP

Check one:

U.S. Citizen

Resident Alien

Non-Resident Alien (*please answer questions below*):

Do you have clearance to work in the United States? Yes No

Type of Visa: _____ Expiration Date: _____

Primary Purpose in the United States: _____

Citizen of: _____

Intended Length of Stay: _____

Are you a CUNY student? Yes No



VETERAN STATUS

Please select one or more of the following:

Not a Veteran

Armed Forces Service Medal Veteran: Any veteran who, while serving on active duty in the U.S. military, ground, naval or air service, participated in a United States military operation for which an Armed Forces service medal was awarded pursuant to Executive Order 12985 (61 FR 1209).

Disabled Veteran: Either (1) a veteran of the U.S. military, ground, naval or air service who is entitled to compensation (*or who but for the receipt of military retired pay would be entitled to compensation*) under laws administered by the Secretary of Veteran Affairs, or (2) a person who was discharged or released from active duty because of a service-connected disability.

Note: *If you have a disability and need a reasonable accommodation to perform the essential functions of your job, please contact the Central Office Human Resources Director to begin an interactive discussion to identify and provide you a reasonable accommodation.*

Other Protected Veteran: A veteran who served on active duty in the U.S. military, ground, naval or air service during a war or in a campaign or expedition for which a campaign badge has been authorized, under the laws administered by the Department of Defense.

Recently Separated Veteran: Any veteran during the three-year period beginning on the date of veteran's discharge or release from active duty in the U.S. military, ground, naval or air service.

Discharge Date: _____



VOLUNTARY SELF-IDENTIFICATION FORM FOR EMPLOYEES

The City University of New York is committed to equal opportunity, and personnel decisions are made on the basis of qualifications without regard to race, color, creed, national origin, ethnicity, ancestry, religion, age, sex, sexual orientation, gender, and/or gender identity, marital status, partnership status, disability, genetic information, alienage, citizenship, military or veteran status, pregnancy, or status as a victim of domestic violence, stalking, or sex offense. The University also complies with federal affirmative action regulations. In order for the University to comply with state, federal and University reporting requirements and to assess the effectiveness of our recruitment efforts, we would greatly appreciate your completing this form. Completion of this form is, however, voluntary and the information collected will be used as required by law.

Any question regarding gender, race or ethnicity, veteran, or disability identification should be directed to the Chief Diversity Officer.

GENDER

Male Female Transgender Non-Conforming
Non-Binary Gender Not Listed Not Specified (*removing gender information*)

*Initial Here _____

ETHNICITY AND RACE

Question 1: Are you Hispanic or Latino (*a person of Cuba, Mexican, Puerto Rican, South or Central American, or other Spanish culture or origin, regardless of race*)?

Yes No

If yes, are you Puerto Rican (*a person of Puerto Rican culture or origin*)?

Yes No

Question 2: Please select one or more of the following categories that apply to you.

American Indian or Alaska Native: a person having origins in any of the original peoples of North and South American (*including Central America*) and who maintains tribal affiliation or community attachment.

Asian: A person having origins in any of the original peoples of the Far East, Southeast Asia, or the Indian sub-continent, including, for example, Cambodia, China, India, Japan, Korea, Malaysia, Pakistan, the Philippine Islands, Thailand and Vietnam.

Black or African American: A person having origins in any of the Black racial groups of Africa.

Italian American: A person having origins in Italy (*this is for CUNY reporting purposes*).

(continued on next page)



Native Hawaiian or Other Pacific Islander: A person having origins in any of the original peoples of Hawaii, Guam, Samoa, or other Pacific Islands.

White: A person having origins in any of the original peoples of Europe, the Middle East or North Africa.



VOLUNTARY SELF-IDENTIFICATION OF DISABILITY

The City University of New York is subject to certain governmental recordkeeping and reporting requirements for the administration of civil rights laws and regulations. Submission of this information is voluntary, and refusal to provide it will not subject you to any adverse treatment. The information obtained will be kept confidential and may only be used in accordance with the provisions of applicable laws, executive orders, and regulations, including those that require the information to be summarized and reported to the federal government for civil rights enforcements. When reported, the data will not identify any specific individual.

Because the University does business with the government, we must reach out to, hire and provide equal opportunities to qualified people with disabilities¹. To help us measure how well we are doing, we are asking you to tell us if you have a disability or if you ever had a disability. Completing this form is voluntary, but we hope that you will choose to fill it out. If you are applying for a job, any answer you give will be kept private and will not be used against you in any way.

If you already work for CUNY, your response to this self-identification will not be used against you in any way. Because a person may become disabled at any time, we are required to ask all of our employees to update their information every five years. You may voluntarily self-identify as having a disability on this form without fear of any punishment because you did not identify as having a disability earlier.

You are considered to have a disability if you have a physical or mental impairment or medical condition that substantially limits a major life activity, or if you have a history or record of such an impairment or medical condition. Disabilities include, but are not limited to:

- Blindness
- Deafness
- Cancer
- Diabetes
- Epilepsy
- Autism
- Cerebral Palsy
- HIV/AIDS
- Schizophrenia
- Muscular Dystrophy
- Bipolar Disorder
- Major Depression
- Multiple Sclerosis (*MS*)
- Missing limbs or partially missing limbs
- Post-Traumatic Stress Disorder (*PTSD*)
- Obsessive-Compulsive Disorder
- Impairments requiring the use of a wheelchair
- Intellectual Disability

¹ Section 503 of the Rehabilitation Act of 1973, as amended. For more information about this form or the equal employment obligations of Federal contractors, visit the U.S. Department of Labor's Office of Federal Contract Compliance Programs (OFCCP) website at www.dol.gov/ofccp.



For the below questions, please check all that apply. If you do not wish to disclose the information, please check the appropriate box.

Are you an individual who has a physical or any other disability?

Yes

No

Federal law requires employers to provide reasonable accommodation to qualified individuals with disabilities. Please tell us if you require a reasonable accommodation to apply for a job or to perform your job. Examples of reasonable accommodation include making a change to the application process or to work procedures, providing documents in an alternate format, using a sign language interpreter, or using specialized equipment.

If you identify as an individual who has a physical or any other disability, do you require special working accommodations?

Yes

No



AMENDED CONSTITUTIONAL OATH UPON APPOINTMENT
(IN COMPLIANCE WITH SECTION 62 OF NY STATE CIVIL SERVICE LAW)

“I do hereby pledge and declare that I will support the constitution of the United States, and the constitution of the state of New York, and that I will faithfully discharge the duties of the position of according to the best of my ability.”

Name (*printed*): _____

Address: _____

Signature: _____

Date: _____



ORIENTATION FOR IT SECURITY

New Employee On-Boarding & Existing Employee Orientation for IT Security

Why is IT Security important at CUNY?

- We must protect the privacy of personal data belonging to our faculty, students and staff as reputable custodians and as is required by law.
- We must maintain accurate University data and prevent unauthorized changes and transactions (e.g., grades, financial aid information).
- We must ensure our academic and administrative systems continue to be available to run the business of the University and to serve our faculty, students, and staff.

What can you do to support IT Security at CUNY?

- Be careful when using the Internet. Malicious code known as malware (e.g., virus, worm or Trojan) can be hidden behind an infected web page, an email attachment or a downloaded program. Keep anti-virus and anti-malware programs and the software on your workstation up-to-date at all times. Only install software authorized by your department, and never disable or change security programs and their configuration.
- Don't be phished. Phishing is a scam in which an email message entices you to respond to in some way that potentially leads you to disclose personal information such as passwords, social security number, bank account number or credit card number. Phishing email may closely resemble authentic communications, but they are not legitimate.
- Don't disclose personal information to someone you don't know. Social engineering is an approach to gain access to information through misrepresentation. It is the conscious manipulation of people to obtain information without their realizing that a security breach is occurring. It may take the form of impersonation by email, telephone or in person.
- Don't disclose personal information within CUNY unless it is absolutely necessary. For example, the need for disclosing your social security number outside of the Human Resource (HR) department would be unusual. When in doubt, contact the HR department directly to verify the legitimacy of the request.
- Protect your user IDs and passwords and never share them. Your user ID is your identification, and it is what links you to your actions on CUNY's computer systems. Your password authenticates your user ID. Use passwords that are difficult to guess and change them regularly.
- You are responsible for actions taken with your ID and password. Log off or lock your computer when you are away from your workstation. In most cases, pressing the "Control-Alt-Delete" keys and then selecting "Lock Computer" will keep others out. You will need your password to sign back in, but doing this several times a day will help you to remember your password.
- Email and portable devices are not inherently secure. Do not transmit personal information belonging to you or CUNY faculty, students, and staff to portable devices (e.g., portable hard drives, memory) or send or request to be sent such personal information in an e-mail text or as an email attachment without encryption.

Where can you find CUNY IT Security information resources?

- Security.cuny.edu is available 24 hours a day from any Internet accessible location without a user ID and password. All relevant policies, procedures, and advisories, the IT Security awareness program and materials, and links to external IT Security information resources are located there.
- Find the Policy on Acceptable Use of Computer Resources under Security Policies and Procedures.
- Find the IT Security Procedures – General under Security Policies and Procedures.



- To take the IT Security Awareness tutorial, approximately 30 minutes, click on the padlock on [CUNY Security homepage](#).

Who can you contact for help with IT Security at CUNY?

- Your [college helpdesk](#)
- The college IT Security Manager (click on the Campus IT Security Managers tab at [security.cuny.edu](#) under Contact Us)
- The college Chief Information Officer or equivalent in the Central Office department
- The CUNY Central CIS IT Security Office at security@cuny.edu; or the Contact Us page at [security.cuny.edu](#)

Where are some external resources for help with IT Security located?

- [Stay Safe Online](#)
- Federal Trade Commission at www.ftc.gov
- Privacy Rights Clearinghouse - Nonprofit Consumer Information and Advocacy Organization at www.privacyrights.org
- Microsoft Malware Protection Center, Threat Research and Response at <https://www.microsoft.com/en-us/wdsi>

What is required of you as an employee of CUNY?

- Acknowledge, by signature below, receipt of the Policy on Acceptable Use of Computer Resources.
- Acknowledge, by signature below, receipt of the IT Security Procedures – General.
- Complete the IT Security Awareness tutorial within the first 30 days of employment.
- Maintain compliance with the Policy on Acceptable Use of Computer Resources and the IT Security Procedures at all times.
- If you discover or suspect a security breach, you should report the incident to your supervisor, the College IT Security Manager (click on Contact Us at [security.cuny.edu](#)) and the CUNY Central IT Security Office (security@cuny.edu) immediately.

I hereby acknowledge receipt of the Policy on Acceptable Use of Computer Resources and the IT Security Procedures – General.

Signature: _____

Name (*printed*): _____

College: _____

Date: _____

One copy for personnel file.

One copy for employee.



CUNY POLICY CHECKLIST/RECEIPT OF POLICIES FOR NEW HIRES

Employee Name: _____ Start Date: _____

Campus: _____ Department: _____

This checklist helps to inform you about the CUNY policies and procedures along with your roles/responsibilities within the organization.

- [CUNY Internal Control Program](#)
- [Workplace Violence Prevention Policy](#)
- [Policy on Sexual Misconduct](#)
- [Policy on Equal Opportunity and Non-Discrimination](#)
- [Reasonable Accommodations and Academic Adjustments](#)
- [Policy on Acceptable Use of Computer Resources](#)
- [Conflict of Interest Policy](#)
- [Policy on Drugs and Alcohol](#)
- [Domestic Violence and the Workplace Policy and Procedures](#)
- [Rules and Regulations for the Maintenance of Public Order](#)
- [Lactation Room Laws – Memorandum re: NYC Law Effective 3/18/19](#)
- [Lactation Room Policy – Effective 3/18/19](#)
- [Procedures for Implementing CUNY Lactation Room Policy 3/18/19](#)
- [New York State Voting Leave Rights](#)
- [Leave for Breast and Prostate Cancer Screening and for Blood Donation](#)

I understand that other policies are available on the CUNY [website](#). If you have any questions regarding the policies listed above, please contact your [Campus HR Office](#).

I acknowledge receiving the following CUNY policies, procedures and related information.

Signature: _____ Date: _____



ADJUNCT (*PART-TIME INSTRUCTIONAL STAFF*) – FACT SHEET

PAYROLL

How often will I be paid?

During the Fall & Spring semesters, teaching Adjuncts will receive 8 payments of equal amounts over the duration of the semester. After your initial paycheck, you can expect to be compensated on a bi-weekly basis. If you have enrolled in the State's Direct Deposit program, your funds will be available to you on Thursday morning. If you opt to receive paper checks, you can contact [your campus HR](#) office for more information.

Am I eligible for direct deposit?

Yes. To enroll please fill out the Direct Deposit Form. You must either attach a voided check, or take the form to your financial institution to be completed.

I cannot locate my social security card, what should I do?

If you find that you cannot locate your social security card, you may visit any Social Security Administration location to request a new one. When you submit your request, SSA will issue a receipt as proof of that request. Please ensure that the receipt includes your name and social security number. Once you have received the receipt, please bring it to your campus HR office for employment verification. For SSA locations and other information please visit <http://www.ssa.gov>.

Too much/too little is being deducted from my pay for taxes, how can I fix it?

If you find that too much or not enough money is being deducted from you paycheck, you may want to review the number of exemptions you've claimed on your tax forms. It is recommended that you seek help from a trusted financial advisor. Employees may update their tax exemptions throughout the year by providing updated tax documents to our payroll office.

What if I miss a class?

An adjunct may be excused for personal illness or personal emergencies including religious observance, death in the immediate family or similar personal needs which cannot be postponed, for a period of 1/15 of the total number of clock hours in the particular session or semester. **Request for such leave, where possible, must be made in advance, in writing. The reason provided must be satisfactory to the chairperson.**

BENEFITS

Can I enroll in TRS?

Yes, you may enroll in the Teachers Retirement System, providing that your current appointment is for at least 45 hours. You may only enroll in TRS when you hold a current appointment.



Am I eligible for health benefits?

As an adjunct, you are eligible for some health benefits. To be eligible, you must be appointed for at least 90 hours in the current semester in one or a combination of CUNY schools and have been appointed for at least one full academic year.

Am I eligible for tuition waiver or reimbursement?

If you have taught one or more courses in the same department at the same college for ten consecutive semesters (*not including summer sessions*) and are appointed to teach not fewer than three contact hours per week in a Fall or Spring semester, you can be granted tuition remission for up to one course for that semester. If the course offered is at the graduate level, it shall be available on a space-available basis. Please refer to Article 29.3 in the PSC/CUNY contract for more information. Tuition waiver forms can be retrieved on CUNY’s website.

Is my enrollment into PSC/CUNY automatic?

While payroll deductions from PSC/CUNY are automatic, enrollment as a union member is not. To be enrolled as a member, you must [submit an enrollment card](#) and returned to your campus HR office.

Am I eligible for transit benefits?

Yes. Forms to enroll in CUNY’s Transit Benefit program can be found on [CUNY’s website](#).

INCREMENTS

When can I expect to receive my next contractual increment?

Pursuant to the PSC/CUNY contract, Article 24.2b, an adjunct in a teaching or non-teaching title who on July 1, shall have served six semesters University-wide over a period of the preceding three years and who has not received a movement in schedule during that period shall receive a movement in schedule to the next highest dollar amount. Increments are awarded only in the second Summer session or Fall semester and not during the Spring semester.

Workload Limitations

Pursuant to the PSC/CUNY Contract an adjunct may be assigned up to nine (9) contact hours during the semester at one unit of the City University of New York. In addition, such adjunct may hold an appointment of **one additional course** up to six (6) hours at a second unit of CUNY.

Please refer to the PSC/CUNY contract section 15.2 for more information, including that of the workload limitation of non-teaching adjuncts.

I submitted an Employment Verification Request, how long do I have to wait?

Requests for employment verifications will require 3-5 business days for processing. You must submit a form indicating what information you need in the letter, your contact information. You can request this information via email, but please ensure your information is clearly indicated in the email.



INFORMATION ON UNION MEMBERSHIP IN THE PROFESSIONAL STAFF CONGRESS/CUNY

For Instructional Staff positions (*Teaching & Non-Teaching*) included under the Collective Bargaining Agreement between The City University of New York (*CUNY*) and the Professional Staff Congress (*PSC*)

PSC

The Professional Staff Congress is the exclusive collective bargaining representative for 30,000 faculty and professional staff at The City University of New York (*CUNY*). The PSC is responsible for negotiating with The City University of New York regarding the terms and conditions of employment of all employees included in the PSC bargaining unit. In addition, employees in the bargaining unit may be represented by the PSC in grievance and disciplinary proceedings. Click this link to access the contract on [CUNY's website](#) and on [PSC's website](#).

- I. **Included Positions for PSC Union Membership** – See Article 1 of the Contract (*available on the CUNY and PSC websites above*).

If you wish to join the PSC and become a union member, you must submit an application to the union. An [on-line application is available on PSC's website](#). This application applies to employees in all covered Full-Time, Part-Time and Graduate Assistant Instructional Staff titles.

If you prefer to have a membership application mailed to you, please call the PSC Membership Department at 212-354-1252.

If you become a Union member, dues will be deducted automatically from your biweekly pay, and remitted directly to the Union. Dues paying members have the right to full participation in the union, including voting on proposed contracts and in union elections, as well as running for union office. PSC is Local #2334 of the American Federation of Teachers (*AFT*) and affiliated with New York State United Teachers (*NYSUT*) and the American Association of University Professors (*AAUP*).

If you wish to learn more about the rights and benefits that accrue with Union membership and the issues that the Union addresses, please visit the [PSC website](#).

For additional questions, you can call the PSC at **212-354-1252** or email psc@pscmail.org. The union office is located at: 61 Broadway, Suite 1500, New York, NY 10006.



II. **Excluded Positions in Represented Titles**— See Article 1 of the Contract

Employees in instructional staff titles in the PSC bargaining unit excluded from representation by the union because of the responsibilities of their positions or the functions of their offices are not eligible to join the union and do not pay dues.

Excluded employees are covered by many of the same terms and conditions of employment as employees represented by the PSC—same salary schedules, pension options, health plans and supplemental welfare fund benefits (e.g., drug, dental, optical)—however, there are significant differences. For example, individuals who are excluded from representation do not have access to the grievance and disciplinary procedures in the collective bargaining agreement.

If you are not certain whether you are appointed to an included or excluded position, you should check with your Human Resources Department, which can also answer any questions you may have concerning the terms and conditions of your employment.