

NEWPORT PUBLIC SCHOOLS
OFFICE OF HUMAN RESOURCES
Employee Data Form
2019-2020

SECTION I

First name: _____ Last name: _____

Address: _____ City/State: _____ Zip _____

Phone: _____ Unlisted (✓) _____

License Plate/Car Make Model: _____

Position/Grade: _____ School(s): _____

Para Educators only, list assignment: _____

If you travel to more than one school, list the schools and percentage of time at each:

Do you hold a position for which you receive a stipend? Yes _____ or No _____

If yes, list the position: _____

SECTION II

Person to contact in case of emergency:

First name: _____

Last name: _____

Address: _____

Phone: _____ Unlisted (✓) _____

SECTION III

The following information is for EEOC reporting purposes and is strictly voluntary.

Please check (✓):

- 1) _____ Male
_____ Female

3) Birthday (year not necessary): _____

not for announcements

- 2) _____ American Indian or Alaskan Native
_____ Asian American or Pacific Islander
_____ African American
_____ Hispanic
_____ White

SECTION IV

I, _____ (print name), acknowledge that I have received and reviewed Newport Public Schools' Staff Handbook, including policies on Sexual Harassment, Drug-Free Workplace, Smoking, Internet Access & Computer Use, Social Media and Physical Restraint, as well as information regarding the Family Educational Rights and Privacy Act (FERPA).

Signature _____

Date _____

*Please complete and return this form to your school's main office by 9/15/2019
For questions, call the Human Resources office at (401) 619-5368. Thank you for your cooperation.*