

In order to ensure your access to campus systems is ready when you arrive on campus, it is critical that we get your information entered as early as possible. This information is required to complete your employment record and will enable you to activate your access more efficiently. If you prefer, you may contact your Department Admin. at the number below.

**For Faculty Member to complete:**

Name:	_____		
	(Last, First, Middle Initial)		
SSN:	_____	DOB (Date of Birth)	_____

**OR**

you may provide the required *information to your Department Admin. at (408) 924-\_\_\_\_\_.*

**Note to Administrator:**

**SHRED THIS  
DOCUMENT AFTER  
POI HAS BEEN  
ESTABLISHED**