# BOROUGH OF MANHATTAN COMMUNITY COLLEGE
## *OFFICE OF HUMAN RESOURCES*

### PERSON OF INTEREST PERSONAL DATA FORM

Please check one that applies: **Type of Action: New POI** ☐ or **Data Changed in Section(s):** A ☐ B ☐ C ☐

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**SECTION A:  PERSONAL INFORMATION** *(Please print or type)*

**Name** _____     **Marital Status** _____ **Gender** _____
       Prefix     First          Middle          Last               Suffix

**Home Address** _____ **Apt. No**. _____   **City** _____   **State** _____   **Zip** _____

**Home Phone Number  (____)** _____   **Alternate Phone Number  (_____)** _____

**Date of Birth** _____/ _____/ _____   **Highest Education Level** _____

**Employment Category:**    **Admin.** ◯    **Supervisor** ◯    **Teaching** ◯
*(Please check all that applies)*

**Check If :   Research Foundation (RF)** ◯   **RETIREE** ◯   **OTHER** ◯ *(Please describe)* _____

**Business E-Mail Address** _____   **Business Phone Number** _____

**Name of Organization/Institution Where Employed** _____

Were you ever or are you employed by The City University of New York?   Yes ◯ No ◯
If yes, in what title and where: _____
Were you ever or are you a student registered within The City University of New York?     Yes ◯          No ◯

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**SECTION B:  EXECUTIVE  OFFICER (EO)/HEAD  OF OFFICE/SUPERVISOR MUST  COMPLETE THIS  SECTION**

**POI's Appointment Start Date:** _____   **End Date:** _____

**Supervisor's Name** _____   **Business Phone Number**  (____) _____

**Supervisor's E-Mail Address** _____

**Supervisor's Work Address (and Department)** _____

**Supervisor's Signature** _____   **Date** _____

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**SECTION C:    EMERGENCY  CONTACT INFORMATION**

**Name** _____     **Phone** _____

**Address** _____     **Apt. No** _____

**City** _____ **State** _____ **Zip** _____     **Relationship** _____

 **POI's  Signature** _____   **Date** _____

PLEASE CONTACT THE OFFICE OF HUMAN RESOURCES AT BMCC BY EMAIL
officeofhumanresources@bmcc.cuny.edu OR CALL (212) 220-8300 IF THE ABOVE INFORMATION
CHANGES.

---------------------*For Office of Human Resources Use Only (New POI)*--------------------------

**Position Number**_____ **Effective Date** ___/_____/_____ **CUNYfirst Employee No.**_____
**Action**: "Add Person Of Interest"

**Action Reason-POI Type:**      Research Foundation ☐     Volunteer ☐     Intern ☐     Other Payee ☐