

Today's Date: _____

NC DEPARTMENT OF AGRICULTURE AND CONSUMER SERVICES MEAT AND POULTRY INSPECTION SERVICE

EMPLOYEE INFORMATION SHEET

PERSONAL INFORMATION

NAME:-First/Last	MIDDLE NAME:
CURRENT ADDRESS:	CITY:
STATE:	ZIP:
HOME PHONE:	CELL PHONE:
PERSONAL E-MAIL ADDRESS:	

BIRTH INFORMATION

CITY OF BIRTH:	STATE OF BIRTH:
COUNTRY OF BIRTH:	DATE OF BIRTH:
SS# OR WORK VISA #:	

EMERGENCY INFORMATION

CONTACT:	PHONE:
RELATIONSHIP:	ADDRESS:
CITY:	STATE:
ZIP:	

RESERVE OR NATIONAL GUARD COMMITMENT IF ANY

BRANCH:	UNIT NAME:
LOCATION:	COMMITMENT: