



Surry County Public Schools

P.O. Box 317
Surry, Virginia 23883

Staff Personal Information Verification Form

Assigned School: _____
Position Held: _____
Teacher License #: _____

Name (Please Print):

Last Name First Name Middle Name

Instant Alert Contact Number: _____
Date of Birth: _____

Home Address:

Street Address 1: _____
Street Address 2: _____
City, State, Zip Code: _____
Home Telephone Number: _____
Alternate Email Address: _____

The federal government has developed new categories pertaining to race and ethnicity in order to provide a more accurate picture of the nation's ethnic and racial diversity. These categories will enable individuals to be identified in ethnic and racial classifications and in more than one racial category.

Hispanic or Latino?

_____ Yes
_____ No

Gender:

Female _____ Male _____

Select one or more of the following categories that apply:

_____ American Indian or Alaska Native
_____ Asian
_____ Black or African American
_____ Native Hawaiian / Other Pacific Islander
_____ White