

31-10 Thomson Avenue - Long Island City, NY 11101- Telephone (718) 482-7200

POI POSITION REQUEST INFORMATION SHEET

| Name: | Last | | | | |
|---|----------------------------------|------------------|-------------|-----------|---------------|
| | | | First | | Middle |
| Social Security #: | | | Department | :: | |
| Effective Date of Hire: | | | Employee St | tatus: FT | PT |
| Appointme | ent End Date: | | | | |
| Employee | Туре: | | | | |
| Other (Coll | lege Association, Auxiliary or E | CLC): | | | |
| If none of the above apply (Intern, consultant, etc): | | | | | |
| | | | | | |
| Date of Birth: | | Gender: | Female | Male | X |
| Ethnicity: | | | | | |
| | gree Earned: | | | | |
| | B | | | | |
| Home Add | res: | | | | |
| | | | | | |
| | City | | State | Zip | County |
| Home Phone#: | | Business Phone#: | | | Ext: |
| Business Email: | | Reports To: | | | |
| | | | | | |
| _ | Signature: | | | | |
| | Print Name: | | | | Date Approved |
| | C | | | | |
| Approved | | | | | |
| l Bv | Drint Nama | | | I | Data Annroyad |