



# Non-Employee Associate Form

For individuals seeking account access with a Non-Employee Associate status (not on Medaille payroll).  
Complete and submit this form to HR. Please note that both the BEGIN and END DATE field are required.

Reason for Requesting Non-Employee status (please circle choice below):

- ☐ Computer Accounts    ☐ ID Badges    ☐ Library Access    ☐ Volunteer    ☐ Consultant  
☐ Visiting Professor    ☐ Other: \_\_\_\_\_

1. Employee Section	Social Security #:	Begin Date:
	Last Name:	End Date:
	First Name:	Mid Initial:
	Select one Prefix: Dr. <input type="checkbox"/> Mr. <input type="checkbox"/> Miss <input type="checkbox"/> Ms. <input type="checkbox"/> Mrs. <input type="checkbox"/>	
	Select one Suffix: N/A <input type="checkbox"/> Sr. <input type="checkbox"/> Jr. <input type="checkbox"/> Other: _____	
	Date of Birth:	
	Home Address: Apt#	
City State: Zip: Phone:		
2. Department Section	Campus Address:	
	City State: Zip: Phone:	
	Department Name: Job Title:	
	Fund/Orgn/Acct #:	
3. Emergency Info. Section	Emergency Name:	
	Home Address: Apt#	
	City State: Zip: Phone:	
	Select Relationship: <input type="checkbox"/> Mother <input type="checkbox"/> Father <input type="checkbox"/> Spouse <input type="checkbox"/> Relative <input type="checkbox"/> Friend	
4. Signatures	Authorized By: Print and Sign Date:	
	Employee:	
	Department:	
	HRIS:	

Preparer Name:
Phone #:
Date:
<b>Please select one in each category:</b>
<b>Gender</b>
M-Male <input type="checkbox"/> F-Female <input type="checkbox"/>
<b>Marital Status</b>
S-Single <input type="checkbox"/> M-Married <input type="checkbox"/>
<b>Race</b>
1-White Non Hispanic <input type="checkbox"/>
2-African American <input type="checkbox"/>
4-Native American/Alaskan <input type="checkbox"/>
5-Asian or Pacific Islander <input type="checkbox"/>
6-Hispanic <input type="checkbox"/>
<b>Citizenship</b>
Y-Citizen <input type="checkbox"/> N-Non Citizen <input type="checkbox"/>