

**BOSTON UNIVERSITY INITIAL
ACADEMIC APPOINTMENT
BIOGRAPHICAL DATA FORM**

INSTRUCTIONS Please attach this form when submitting recommendation for initial faculty appointment. Please note: it is important that all these sections of these forms are complete.

PERSONAL DATA

<i>Name (Last, First, MI)</i>	<i>Date of Birth</i>	<i>Social Security Number</i>	<i>E-mail Address</i>	
<i>Home Address (Street, PO Box No., Apt. No.)</i>		<i>Home City or Town</i>	<i>State</i>	<i>Zip Code</i>
<i>Home Phone (including Area Code)</i>		<i>Citizenship/Permanent Resident Status</i> <i>US Citizen Permanent Resident</i> <i>non-US Citizen on Visa</i> <i>If non-US Citizen or P.R., list country of citizenship:</i>	<i>Visa Type</i>	<i>Expiration Date</i>

EDUCATION (List highest degree first.)

<i>Degree</i>	<i>Date Earned</i>	<i>Institution</i>
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PRIOR BOSTON UNIVERSITY WORK EXPERIENCE

<i>Unit-Department</i>	<i>Title</i>	<i>FT / PT</i>	<i>Period Worked</i>
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WORK EXPERIENCE FROM COMPLETION OF TERMINAL DEGREE (List most recent experience first.)

<i>Institution</i>	<i>Title</i>	<i>FT / PT</i>	<i>Period Worked</i>
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Form completed by _____ *Date* _____