

Non-Employee Information Sheet

Name: _____ SSN # _____ VT ID # _____
(if non-VT student): (if VT student):

Home Address:

(STREET)

(CITY) (STATE) (ZIP)

I do I do not wish to have my home address and phone number listed in the campus directory

Home/ Cell Phone: _____ E-mail: _____

Do you need a VTC email account? Yes No

Gender: Male Female Date of Birth: _____

Ethnicity: Hispanic Non-Hispanic Race: _____

Citizen: Yes No If no, Country of Citizenship: _____ Visa Type: _____

Name of Home Institute: _____

Professional Title: _____

VTCRI Information:

Effective Dates of Appointment with VTCRI: Start Date: _____ End date: _____

Faculty Mentor for your Dissertation: _____

Status while with the VTCRI: Paid by any programs? Yes No If so, please list: _____

Virginia Tech Student (Letter of Volunteerism recommended)
 Undergraduate Major _____ Research for Credit: Yes No
 Master's/GRAD Major _____
 Doctoral Major _____

Other Student (Letter of Volunteerism recommended)
 High School School Name: _____
 Undergraduate School Name: _____ Major: _____
 Master's School Name: _____ Major: _____
 Doctoral School Name: _____ Major: _____
 Medical School Name: _____ Major: _____

Faculty Collaborator / Visiting Scholar / Researcher / Postdoc (Adjunct Letter recommended)
Institution & Department Name: _____

Staff Research Collaborator
Institution & Department Name: _____