

**Employability Credential  
Student Information Form**

**Personal Information**

Last Name: \_\_\_\_\_ First Name: \_\_\_\_\_ MI: \_\_\_\_\_  
Address: \_\_\_\_\_ Apt. No.: \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_  
Telephone: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

**Emergency Information**

In case of an emergency, please notify: \_\_\_\_\_  
Relationship to you: \_\_\_\_\_  
Address: \_\_\_\_\_ Apt. No.: \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_  
Home Phone: \_\_\_\_\_ Business Phone: \_\_\_\_\_

**Optional Personal Information Please be advised that it is not necessary for you to answer any of this information and not completing this section cannot be held against you for purposes of employment**

Height: \_\_\_\_\_ Weight: \_\_\_\_\_ Age: \_\_\_\_\_ Marital Status: \_\_\_\_\_  
Sex: Male    Female

**Education**

High School: \_\_\_\_\_ Dates of Attendance: \_\_\_\_\_  
Vocational School/Program: \_\_\_\_\_  
College: \_\_\_\_\_  
Other Training (explain): \_\_\_\_\_

**List all machines and special equipment you can operate:**

**List any special skills you have:**