



Student Hiring Form *Indicates Required Fields

Enter Your name as it appears on your Social Security card or I-20.

First Name (Given Name)*:

Middle Name:

Last Name (Family Name, Surname)*:

Known as (Preferred First Name):

Suffix (select one if applicable):

Affiliation*: (Have you ever been affiliated with Duke in any capacity before - student or employee)?

DUID:

NetID:

SSN*:

If you do not have a SSN, enter 999-99-9999 and indicate if you have applied for a SSN in the check box below

SSN to be Applied For:

Date of Birth* (MM/DD/YYYY):

Gender*:

Marital Status*:

Veteran Status*:

This refers to US Armed Forces only. If you have not served in the US military, please choose Non-Veteran

Highest Level of Education Completed*:

Ethnicity*:

Race (select all that apply) *:

Select your primary race affiliation and if applicable check any additional race affiliation in the check box(es) below

- American Indian or Alaskan Native
- Asian
- Black or African American

- Native Hawaiian or Other Pacific Islander
- White

Citizenship (Select one) *:

US Home Address *:

US Home Address City*:

US Home Address State*:

US Home Address Zip*:

Cell Phone number*:

Email*: