Complete and return to Lisa Box at charterschool@shsu.edu

Sam Houston State University



Requesting Department: Charter School		
equesting Department Contact: Lisa Box (4-334	47)	
Social Security Number:		
Full Legal Name:		
First	Middle	Last
Date of Birth:	U.S. Phone:	
Email Address:	U.S. Mailing Address: _	_
1. Citizenship status:		
☐ Natural born U. S. Citizen	Non-Resident Alien	
☐ Naturalized Citizen	Permanent Resident Alie	n
2. Gender: Male Female		
3. Are you Hispanic or Latino?	Yes No	
4. What is your ethnicity? Mark all that ident	ify you:	
☐ American Indian or Alaska Native	☐ Hispanic	
Asian	Native Hawaii	an or Pacific Islander
☐ Black or African American	White	
5. Reason for Non-Compensated Affiliate Re	equest:	
☐ Visiting Scholar	ROTC	
Exchange Scholar		nool Volunteer
 The HireRight Request will be sent to the email address p After the HireRight Clearance is received, a SAM ID will Non-Compensated Affiliates are typically set up for a manney Non-Compensated Affiliates will need to complete require 	be issued to create an Electronic Personnel Action Foximum of one (1) calendar year at a time. ed SHSU training.	
The information provided by me in connection with	h this document is true and complete to the	best of my knowledge.
Signature	-	Date