

Sam Houston State University Human Resources

lon-Compensated Affiliate S	on-Compensated Affiliate Sam ID and Clearance Request		
his form is required for clearance subi	mission and Sam ID creation	ı.	
Social Security Number:		Requesting Department:	
Full Legal Name:			
Date of Birth:	U.S. Phone:	Email Address:	
Citizenship status:			
Natural born U. S. Citizen		Non-Resident Alien	
Naturalized Citizen		Permanent Resident Alien	
2. Gender: Male	Female		
3. Are you Hispanic or Latino	Yes	No	
4. What is your ethnicity? Ma	ark all that identify you:		
American Indian or Al	laska Native	Hispanic	
Asian		Native Hawaiian or Pacific Islander	
Black or African Amer	rican	White	
5. Reason for Non-Compensat	ted Affiliate Request:		
Visiting Scholar - App	pointment letter	ROTC	
from the University Pr be attached.	resident should	Other:	
	this form. Please note th	ce is received. The Accurate Request will be sent to the hat non-compensated affiliates are set up for a maximum	
The information provided by	me in connection with	this document is true and complete to the best of my knowled	
Signatur	0		