University of California, Riverside BIOGRAPHY FOR ACADEMIC PERSONNEL U1501-5 (R3/01)

| To be filled out by Departi | ment P | LEASE PRINT | OR TYPE | | | | |
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| Campus | Department | | | Title(s) | | | |
| RIVERSIDE | | | | | | | |
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| Name | First | Middle | | | _ Mr./Mrs./ Circle One | /Miss/Ms. | (optional) |
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| Prior University Experience? | Yes N | lo | If "Yes", list of | on the follow | ving page. | | |
| Permanent Home Address | | | | | | | |
| | Street | City | | State | Zip | Phone | |
| Current Home Address | | | | | | | |
| | Street | City | | State | Zip | Phone | |
| . . . | | , | | | • | | |
| Current Business Address | Street | City | | State | Zip | Phone | |
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| Date of Birth | | Are y | ou a citizen o | of the U.S.? | Yes | | No |
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| If Not a Citizen of the U.S., D | ate Entered U.S. | | | Type of Visa | a | | |
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RETENTION: Academic Personnel - Senate Member: 5 years after separation to permanent. Non-Senate Member: 5-10 years after separation. Other Copies: 0-5 years after separation.

PREVIOUS APPLICABLE EMPLOYMENT

Please show a full account of your time from the date of your first academic (or otherwise relevant) employment up to the present, including any periods when you may not have been employed. Show most recent position first, followed by prior employment. Indicate part-time appointments and leaves of absence. Show salary or approximate annual earnings in all cases. Please include all previous University of California employment. You may attach supplementary information.

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Please indicate areas of sub-specialization, if any. Also include special licenses or permits.

Memberships: Please list membership in scholarly societies, accreditation boards, civic organizations, etc. You may exclude any organization the name or character of which may indicate the race, religion, or national origin of its members.

Honors, Awards: Please list honors or awards such as Fulbright grants, Woodrow Wilson scholarships, special lectureships, medals, etc., and dates received.

Department

PUBLISHED WRITINGS and/or CREATIVE ACTIVITIES

Published writings and/or creative activities may be listed here or appended separately.

| Please check if you are |
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Signature _____

Date _____

NOTE: Be sure you have checked the appropriate box and placed your initials in the spaces provided on pages 3 and 4.