



Statement of Previous State Employment

With a few exceptions, you have the right to request, receive, review and correct information about yourself, that was collected using this form.

Name		Social Security No.	
Department			

Please select the appropriate response.

<input type="checkbox"/>	I have not been employed by the State of Texas at any time prior to employment at Prairie View A&M University.
<input type="checkbox"/>	I have been employed by the State of Texas at any time prior to employment at Prairie View A&M University (including employment in a student status).

The state agencies at which I was employed are listed below.

Agency Name			
Department			
Address			
Employment Date (From)		Employment Date (To)	
Name used during Employment			

Agency Name			
Department			
Address			
Employment Date (From)		Employment Date (To)	
Name used during Employment			

Agency Name			
Department			
Address			
Employment Date (From)		Employment Date (To)	
Name used during Employment			

I hereby authorize the state agencies listed above to verify the above information. If I am transferring from within the Texas A&M University System, I authorize the release of my personnel/payroll file to Prairie View A&M University and the Office of Human Resources.

Employee Signature: _____

Date: _____