Human Resources
A&M-COMMERCE

DATA COLLECTION FORM

This form is required for manual background check submissions.

For Office Use Only – Group ID (optional)

For Office Use Only – User ID (optional)

For Office Use Only – Location / Store # (optional)

First Name

Middle Name or Initial

Last Name

Date of Birth (MMDDYYYY)

Other Names Known By

Male

Female

Social Security Number

Primary Telephone Number (no dashes)

Current Address
address

Apt #

#yrs at this

City

State

Zip Code

Previous Address
address

Apt #

#yrs at this

City

State

Zip Code

Driver's License Number (no dashes)

License State

Email Address

Signature

Today's Date (MMDDYYYY)

NOTE: PLEASE DO NOT SUMIBT THIS FORM VIA EMAIL. FORM MUST BE SUBMITTED IN PERSON TO HUMAN RESOURCES.
ADDRESS: 2800 UNIVERSITY DR., COMMERCE TX. (MCDOWELL BUILDING SUITE 171)