National Bureau of Economic Research

Personnel Action Form (Hourly Research Assistant Version)

Personal Information :						
Last name, first name, middle initial :						
Current Address:						
Home Telephone Number :						
Email Address (if available) :						
Permanent Address and phone #:						
(if different from your current addre	(if different from your current address)					
Position Information :						
Job Title :						
Supervisor's Name :						
Expected Hours of Work per Week:						
Work Location :						
Work Telephone Number:						
Effective Date :						
Hourly Rate of Pay:						
	Grant Allocation :					
	Grant Anocation .		Project			
NBER Account Number(s)	Project Name(s)	% of Effort	Termination Date			

Statistical D	ata:		
This informatio confidence.	n is requested to enable complia	nce with Fed	deral and State regulations and will be held in strict
Date of Birth:	Gender:		Citizenship:
Are you a US \ If yes, did you	Veteran? Yes serve during the Vietnam Era?	No Yes	No
Ethnicity:	American Indian/Alaskan Native White Hispanic	;	Black (not of Hispanic Origin) Asian/Pacific Islander
I would like m	ny paychecks:		sent to my current address
Research A	ssistant's Signature		
either myself continue bey I understand	or the principal investigator of yond the termination date of the	f my project ne grant liste	by employment may be terminated at any time by et. Under no circumstance will my employment ted in the Grant Allocation Section of this form. NBER with any address changes so that I will
Research As	sistant's Signature		Date
Approval Siç	jnatures :		
Project Direc	tor (s) :		Date :
Office of the	President :		Date :

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