



State & Auxiliary Employee Information Form

Form with fields for Employer, Job Title, Department, Supervisor, Name, Address, Phone, Citizenship, Education, and Emergency Contact.

I affirm that all the answers and statements on this form are complete and true to the best of my knowledge and belief. Employee Signature Date

State Employee Only - OATH OF ALLEGIANCE (U.S. Citizens Only) I, \_\_\_\_\_, do solemnly swear (or affirm) that I will support and defend the Constitution of the United States and the Constitution of the State of California against all enemies, foreign and domestic; that I will bear true faith and allegiance to the Constitution of the United States and the Constitution of the State of California; that I take this obligation freely, without any mental reservation or purpose of evasion; and that I will well and faithfully discharge the duties upon which I am about to enter. Employee Signature

FOR HR USE ONLY AUTHORIZED PERSONNEL SIGNATURE This form was completed (and Oath subscribed before me) on \_\_\_\_\_ Date \_\_\_\_\_ Signature \_\_\_\_\_