

Surry County Public Schools

45 School Street • P.O. Box 317 • Surry, VA 23883

Office: (757) 294-5229 • Fax: (757) 294-5263

Employee Data Sheet

Date _____

Name _____
Last First Middle

Mailing Address / Physical Address _____

Email Address _____

Phone Number _____

Social Security Number _____

****Please enter your entire social security number****

Date of Birth _____

Marital Status: _____ Single _____ Married

Position _____ Date Employed _____

Has there been a lapse of years employed with Surry County Public Schools _____

If Yes, What Years _____

Did you participate in a Virginia Retirement System (VRS) covered position? _____ Yes _____ No

For Principals, Asst. Principals, Supervisors, Teachers and Aides

Endorsement(s) _____

Certificate Expiration Date _____ Tenure _____ Non-Tenure _____

College/University Graduated From	Degree	Date

Years of experience in other VA Divisions _____

Years of experience in other states _____