

_____ Campus_____

The Texas Public Information Act allows employees, officials, and former employees and officials to elect whether to keep personal information confidential. Unless you choose to keep it confidential, the following information may be subject to public release if requested under the Texas Public Information Act. Therefore, please indicate whether you wish to allow public release of the following information.

	Public	Access?
Home Address	No 🗖	Yes 🗖
Personal E-mail Address	No 🗖	Yes 🗖
Home Phone Number	No 🗖	Yes 🗖
Personal Cell Phone Number	No 🗖	Yes 🗖
Emergency Contact Information	No 🗖	Yes 🗖
Information that reveals whether you have family members	No 🗖	Yes 🗖

This form should be completed and signed by the employee no later than the 14th day after the date the employee begins employment, the public official is elected or appointed, or a former employee or official ends employment or service.

Employee Signature _____

Date_____