

Start Date: _____

mozilla

US Employee Information

Name: _____
Last First Middle

SSN or Social Ins. # (CAD): _____ Date of Birth: _____
(mm/dd/yyyy)

Home Address: _____

Gender: Male Female Marital Status: Married Single

US Citizen: Yes No If no, current VISA status/type? _____

Ethnicity: White or Caucasian Black or African American Native Hawaiian or other Pacific Islander
 Hispanic or Latino Alaskan/Native American
 Asian Other: _____

Emergency Contacts:

1. _____
Name Phone # Relation

2. _____
Name Phone # Relation

Current Email Address: _____ Phone #: _____

Mozilla Email Address (if known): _____

Will you be relocating to the Mountain View area? Yes; Date: _____ No
If yes, please complete relocation form and attach.

Have you contributed to a 401K plan, in 2012, prior to joining Mozilla? Yes No
If yes, how much: _____

How did you hear about this position? _____
If referred by an employee, please list their name

