

Current and/or Change in Family Relationships Form

Please initial one of the following, as it applies to _____
(Your Job Title)

_____ I am not related to anyone employed at the College of Southern Nevada.

_____ I am related to the following individual(s) employed at the College of Southern Nevada.

_____ (Name)	_____ (Department)	_____ (Relationship)
_____ (Name)	_____ (Department)	_____ (Relationship)
_____ (Name)	_____ (Department)	_____ (Relationship)

I have read and understand the CSN Nepotism Policy. I also certify that the above information is true and complete.

_____ (Name Please Print)	_____ (Signature)	_____ (Date)
_____ (Employee ID #)	_____ (Department)	_____ (Sort Code)