

LIBRARY OF CONGRESS APPLICANT DATA FORM

Applicants: a completed form will include personally identifiable information (PII) and should only be sent electronically through a secure / encrypted process.

1. FULL NAME (Provide your full name: First, Middle, Last, Suffix. If you have only initials in your name, provide them and indicate "initial only." If you do not have a middle name, indicate "No Middle Name." If you are "Jr.," "Sr.," etc., enter this under Suffix.)



2. SOCIAL SECURITY NUMBER



3. PLACE OF BIRTH (Include city and state or country.)



4. ARE YOU A U.S. CITIZEN?

YES NO (If "NO," provide country of citizenship) ▶

5. DATE OF BIRTH (MM / DD / YYYY)



6. OTHER NAMES EVER USED (For example, maiden name, nickname, etc.)



7. PHONE NUMBER (Include area code)



8. EMAIL ADDRESS



9. MAILING ADDRESS (Include street address or box number, apartment or suite number, city, state, ZIP code, and country if not U.S.)



10. Do any of your relatives work for the Library of Congress? (Include: father, mother, husband, wife, son, daughter, brother, sister, uncle, aunt, first cousin, nephew, niece, father-in-law, mother-in-law, son-in-law, daughter-in-law, brother-in-law, sister-in-law, stepfather, stepmother, stepson, stepdaughter, stepbrother, stepsister, half-brother, and half-sister.)
If "YES," provide relative name(s) and relationship(s) and the Library organizational unit(s) where your relative(s) work.

YES NO



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