



STUDENT ASSISTANT EMPLOYMENT INFORMATION FORM

Part I is completed by student and Part II is completed by department, please return all paperwork to Human Resources, 219 Raymond Hall

PART I - To be completed by student

(Must be enrolled in SUNY classes during period of employment)

Name _____ (First Middle Initial Last – must match social security card) US Social Security # _____ Date of Birth _____ Pnumber _____ Gender M _____ F _____

Campus/Local Address _____ Email _____

Legal Home Address (not PO Box) _____ (Street) _____ (Town) _____ (State) _____ (Zip Code) Home Phone # () _____

Other Address (PO Box or other) _____ (Street) _____ (Town) _____ (State) _____ (Zip Code) Local/Cell Phone # () _____

US Citizen? ___Yes ___No *If no, country of citizenship _____ Visa type _____ Work authorization through _____ (date) *You must report to Human Resources with your work authorization

Ethnicity: Hispanic? ___Yes ___No

Race: Select all that apply: ___White ___American Indian or Alaska Native ___Black or African American ___Asian ___Native Hawaiian & Other Pacific Islander

Highest Educational Level Completed: ___High School only ___AA ___AS ___BA ___BS ___MA ___MS Name of College _____ Date of graduation: (MM/YY) _____

Veteran Status: ___Non Veteran ___Veteran ___Recently Separated Veteran ___Other Eligible Veteran ___National Guard Active ___Active Reservist ___Armed Forces Service Medal Veteran ___Disabled Veteran ___Spouse of 100% Disabled Veteran ___Special Disabled Veteran ___Disabled Viet Nam Veteran ___Disabled Viet Nam Veteran from NYS ___Viet Nam Era Veteran ___Viet Nam Era Veteran from NYS

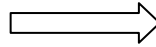
New York State Employees' Retirement System (NYS ERS) - Select one:

- ___ I am currently a member of the New York State Employees' Retirement System
- ___ I would like to join the New York State Employees' Retirement System (enrollment form is required and available in Human Resources)
- ___ I choose NOT to enroll at this time, I understand that I am eligible to join the New York State Employees' Retirement System

Direct Deposit

- ___ I would like to enroll in direct deposit (Enrollment form is required and available in Human Resources or visit <http://www.potsdam.edu/offices/hr/upload/directdeposit.pdf>)
- ___ I was previously enrolled in direct deposit (You will be contacted by Human Resources for required verification of banking information)
- ___ I do not want direct deposit

***** I certify these answers are correct to the best of my knowledge and ability.



(Signature of Student)

(Date)

Important campus policies as well as the Student Employment Handbook are available on the Student Employment Website at <http://www.potsdam.edu/offices/hr/student.cfm>

Part II - To be completed by department

Signature of all other persons authorized to sign timesheets

Name of department where student will be working _____

Employment Dates _____ to _____

Hourly Rate \$ _____ Estimated earnings during employment period \$ _____ Account(s) # _____

Signature of department head/budget approval

Printed name of department head/budget approval

Date

Department Phone Number

OFFICE USE ONLY

Line # _____ Appoint _____ Term _____ Add Acct _____ Change Acct _____ Change Rate _____ Extend _____

Enrolled in Classes Full-Time ___ Part-Time ___ Change FICA Indicator _____ W4 _____ IT2104 or 2104E _____ I-9 _____

HIR _____ CCH _____ REH _____ EMPL# _____ SUNY HR _____ DISTRI _____ DBASE _____ Mail Drop ID _____ Direct Deposit _____ Retirement _____ Rev 1/11