Annual Student Employee Information

For _____ fiscal year: July 1, _____ - June 30, _____
Academic year Year Year

Section 1: Offer of Student Employment (completed by Hiring Authority with job descriptions attatched)

Date of Offer: _____ Date Records Complete: _____ Job Description attatched? ☐

From:

_____ _____
Name of Hiring Authority Building and Office Number

_____ _____
Department Mail Stop

To: _____
Student's First Name Student's Last Name WWU ID

Current Address: _____ _____
Street Address Apartments/Unit #

_____ _____ _____
City State ZIP Code

We are pleased to offer you the following position (see job description):

Job Title: _____ Starting Wage: _____

Position Number: _____ Suffix: Work Location: _____

Supervisor: _____ Work Phone: _____

E-Mail Address: _____

Start Date: _____ Start Time: _____ Last Work Date: _____

If applicable this offer of employment may be contingent upon a complete background check satisfactory to the University and your ability to meet federal employment eligibility requirements, including paperwork with HR. If you accep the terms of this offer, please complete the following section, sign and return by the Requested Return Date above.

Employers, check box to indicate that a background check is necessary to continue this hiring process ☐

Signature of supervisor/hiring authority: _____

Section 2: Student Employee Information

Local Address: _____ _____
Street Address Apartment/Unit #

_____ _____ _____
City State ZIP Code

Phone: _____ Birth Date: _____

WWU E-Mail Address (used for all official communication): _____

My Current Grade Level Is: ☐ My anticipated year/quarter of graduation is: _____

I expect to be enrolled half-time or greater for the following quarters (check all that apply):

Fall ☐ Winter ☐ Spring ☐

I expect to have a "Graduate Exclusion or Credit Load Waiver" for the following quarter (select one quarter if applicable):

Fall ☐ Winter ☐ Spring ☐

I currently work in the following additional WWU employment positions (list all depts. and jobs):

_____

I have accepted Work Study as part of my Financial Aid (and have provided a copy of official confirmation):

Yes ☐ No ☐

I am a returning WWU student Employee and therefore have a current W-4 form on file:

Yes ☐ No ☐

I am a returning department student employee and have a completed I-9 on file at WWU:

Yes ☐ No ☐

I accept the terms of this offer and confirm all information is complete and accurate and I have read and understand the Student Employment Handbook found online. I will notify my supervisor should any of the information above change.

Signature of Student Employee: _____ Date: _____

Section 3. Employer/Hiring Authority Section

To be completed upon receipt of completed first half of this form by the student, after all paperwork is completed with HR

Is this student considered Full-Fee Paying (refer to their expected enrollment above):

Yes ☐ No ☐

Is an undergraduate student enrolled in a minimum of 6 credits for the following quarters:

Fall ☐ Winter ☐ Spring ☐

Is a graduate student enrolled in a minimum of 4 credits for the following quarters:

Fall ☐ Winter ☐ Spring ☐

For any quarters that the student is not full-fee paying: student expects the graduate school to confirm their graduate exclusion for the following quarters (they must have completed all coursework on their approved plan of study and are enrolled for a minimum of 2 thesis or research credit hours)

Fall ☐ Winter ☐ Spring ☐

Student expects to submit a Credit Load Waiver for **one quarter** this year

Fall ☐ Winter ☐ Spring ☐

Break Period Employment: Based on student eligibility the quarters immediately prior and immediately after the break, this student is eligible to work during the following break periods:

Winter ☐ Spring ☐ Summer ☐

Would you like to request that HR complete a Background Check (required for "security sensitive positions")?

Yes ☐ No ☐

Is a completed I-9 on file in Human Resources?

Yes ☐ No ☐

Does the student have a currnt have a current W-4 on file in human resources?

Yes ☐ No ☐

Have you confirmed that the student is not employed in other non-student employment positions at the University?

Yes ☐ No ☐

International students (with F-1 or J-1 visa status) have had their eligibility confirmed by International Student and Scholar Services at (360) 650-7971.

Yes ☐ No ☐

Have you identified a process to confirm that the average maximum hours per week will be no more than 19 hours for all ALL on-campus positions worked during the academic year?

Yes ☐

This position is not replacing a classified position?

Yes ☐ No ☐

Signing this document verifies that all information above is complete and accurate

Signature of hiring authority: _____ Date: _____

Section 4. Electronic Employment Forms

Hiring Form: Transaction or Form Number: _____ Date: _____

☐ **NOAEPAF** - For department, Work Study and Non-uniform, position

☐ **Student Employment E-Form** - For grant funded and salaried positions

Transaction or Form Number: Date: Position /Title Pay rate

Status Change: _____

_____

Termination: _____