

Hire/Maintenance Form 2017-2018

Office of Student Employment

Federal regulations require this form to be processed **before** the student begins working.

Return This Form To:

Office of Student Employment
412 Yost Hall

voice: 216-368-4533
fax: 216-368-5054

Student's LAST NAME		STUDENT'S FIRST NAME	SIS STUDENT ID #
Network ID # @case.edu	EFFECTIVE DATE OF EMPLOYMENT MM / DD / YY	<input type="checkbox"/> New Campus Hire (requires employment packet)	<input type="checkbox"/> Continuous Campus Employment

I. Check All That Apply:

- New Hire: For first time employment position with hiring department (requires job description)
- Additional Hire: For any student who has more than one position (requires job description)
- Rehire: Student returning to previous department
- Summer Hire: Registered (1/2 time in an 8 week course) Not Registered International
- UGTA: (Proof of training required) Course # _____ Grader Lab Tech Lab Assistant
- In-Class Assistant Recitation Leader

II. Maintenance Requested:

- Budget Change: For changes in OPR #
- Hourly Rate change: Merit Promotion Adjustment
- Data Change: Change of Supervisor New Job Title/Code
- Termination: student terminated for reasons other than end of a term.
- Request for a job code

III. Position Information: Attach a copy of the job description for all hires.

Program: Federal Work-Study Campus/Non Work Study
Home Department OPR#: _____ Job Code: _____ Hourly Rate: _____
Supervisor's Name: _____ Emplid # _____
Supervisor's Network ID: _____ Phone #: _____
Person approving student's time: _____ Emplid # _____
Supervisor's/Coordinator's Signature: _____ Date: _____

IV. Student Certification-Student must read and sign:

I certify the information provided is true and accurate. I understand if I am employed as a student employee (Federal work study or non-work study) at Case Western Reserve University, I must be enrolled at least half time. If for any reason I withdraw during the academic year, I must inform my supervisor immediately. Employment will cease upon determined date of withdrawal. I agree to complete the required employment forms before beginning work; I understand I cannot work over 20 hrs/wk during an academic semester or 40 hrs/wk during winter/spring/summer breaks, and cannot work during my scheduled class times. I agree to abide by all rules and guidelines as published in the Student Handbook located at: http://financialaid.case.edu/documents/FinancialAidStudentEmployment_081815.pdf

Student's Signature: _____ Date: _____

Student Employment Use Only

Hiring process is complete? <input type="checkbox"/> Yes <input type="checkbox"/> No	Academic Year 2017-2018 <input type="checkbox"/> Summer 2017 <input type="checkbox"/>	Start Date _____	End Date _____
Employment Packet: <input type="checkbox"/> 1-9 complete with acceptable ID <input type="checkbox"/> Withholding forms complete <input type="checkbox"/> PTW expiration date _____ Verified by: _____	Student Status: <input type="checkbox"/> Undergraduate: 1410/1450 <input type="checkbox"/> Graduate: 1420/1460 <input type="checkbox"/> International 1410/1420 Expected Graduation Date: _____	FWS Award: \$ _____ This award may be modified due to future changes in eligibility Verified by: _____ Record #: <input type="checkbox"/>	Processor's Initials: _____ Date: _____

Student Employment Coordinator: Gloria D. Jenkins