

STUDENT EMPLOYMENT AUTHORIZATION FORM

Hiring Priority Must be Given to Federal & International Work Study Recipients

Instructions: This form is required to be completed by the hiring supervisor prior to employing student workers in his/her department during the academic year. If this is a new position, you will need to submit the new position description to the Office of Human Resources for approval and wage assignment.

STUDENTS ARE NOT ELIGIBLE TO WORK UNTIL THEIR PAYROLL FORMS ARE COMPLETED.

As required by law, the Form I-9 and federal tax withholding form W-4 must be completed by ALL students on or before their first day of work.

Please complete the information below and send to the Office of Human Resources. Once approved, Human Resources will send you a copy of the approved form.

Student's Name: _____ Student ID#: _____

___ Federal Work Study Eligible ___ International Student Work Study Eligible

Job Title: _____ Hourly Rate: _____

Dept. Name: _____

PS Account # _____ PS Fund# _____ PS Dept # _____ PS Program# _____

of Hours per Week: _____ Start Date: _____ End Date: _____

Supervisor Name: _____

Please Print

Supervisor Signature: _____

Date

To be completed by Human Resources:

This action request is approved.

HR Representative Date

Payroll: I-9 _____ W-4 _____ Hourly Pay Rate _____ Wage Rate Notification _____

To be completed by RO/ARO for International Students only:

This is to certify that _____ has been accepted for the employment listed above, is in valid F-1/J-1 status, and is eligible to work on campus under DHS authorization 22CFR62.23(g)(1)(ii)&(iii).

RO/ARO Name & Title _____

RO/ARO Signature _____

Telephone Number _____ Date _____



**Notice and Acknowledgement of Pay Rate and Payday
Under Section 195.1 of the New York State Labor Law
Notice for Hourly Rate Employees**

1. Employer Information

Name:

Doing Business As (DBA) Name(s):

FEIN (optional):

Physical Address:

Mailing Address:

Phone:

3. Employee's rate of pay:

\$ _____ per hour

4. Allowances taken:

- ☐ None
☐ Tips _____ per hour
☐ Meals _____ per meal
☐ Lodging _____
☐ Other _____

5. Regular payday: _____

6. Pay is:

- ☐ Weekly
☐ Bi-weekly
☐ Other

7. Overtime Pay Rate:

\$ _____ per hour (This must be at least 1½ times the worker's regular rate with few exceptions.)

Regular Hourly Pay Rate	Overtime Hourly Pay Rate
\$8.00	\$12.00
\$9.45	\$14.18
\$10.00	\$15.00

8. Employee Acknowledgement:

On this day I have been notified of my pay rate, overtime rate (if eligible), allowances, and designated pay day on the date given below. I told my employer what my primary language is.

Check one:

- ☐ I have been given this pay notice in English because it is my primary language.
☐ My primary language is _____. I have been given this pay notice in English only, because the Department of Labor does not yet offer a pay notice form in my primary language.

Print Employee Name

Employee Signature

Date

Preparer's Name and Title

2. Notice given:

- ☐ At hiring
☐ On or before February 1st

The employee must receive a signed copy of this form. The employer must keep the original for 6 years.