

**ASSOCIATED STUDENTS
SAN DIEGO STATE UNIVERSITY**

PAYROLL LIAISON NEW HIRE GUIDE

FORMS:	ITEMS TO BE COMPLETED:
<p style="text-align: center;">NEW HIRE APPLICATION: Employee completes his/her personal information and supervisor completes the payroll section box</p>	<ul style="list-style-type: none"> <input type="checkbox"/> Name <input type="checkbox"/> Red ID # <input type="checkbox"/> Start Date <input type="checkbox"/> Home Locator (including listing of any additional locators & pay rates) <input type="checkbox"/> Starting Pay Rate <input type="checkbox"/> Job Title <input type="checkbox"/> Supervisor Name <input type="checkbox"/> A.S. Driver? If yes, send a copy of unexpired driver's license & Operating Vehicles Agreement <input type="checkbox"/> A.S. Supervisor? Y/N <input type="checkbox"/> SDSU Student ? Y/N <input type="checkbox"/> Approval Signatures <input type="checkbox"/> Employee's Signature and Date
<p style="text-align: center;">AT WILL ACKNOWLEDGEMENT & AGREEMENT Employee completes</p>	<ul style="list-style-type: none"> <input type="checkbox"/> Signature and Date
<p style="text-align: center;">EMPLOYEE EMERGENCY INFORMATION Employee completes</p>	<ul style="list-style-type: none"> <input type="checkbox"/> Emergency Contacts' phone numbers and addresses <input type="checkbox"/> Signature and Date
<p style="text-align: center;">W-4 (CURRENT CALENDAR YEAR) Employee completes</p>	<ul style="list-style-type: none"> <input type="checkbox"/> Name & Address <input type="checkbox"/> Social Security Number <input type="checkbox"/> Marital Status - box no. 3 <input type="checkbox"/> Number of Allowances - box no. 5 <input type="checkbox"/> Exemption from withholding - box no. 7, if tax exempt - no allowances should be claimed in box 5. <input type="checkbox"/> Signature and Date
<p style="text-align: center;">DIRECT DEPOSIT AUTHORIZATION Employee completes</p>	<ul style="list-style-type: none"> <input type="checkbox"/> Signature and Date <input type="checkbox"/> Voided check should be attached
<p style="text-align: center;">CONFIDENTIAL STATISTICAL DATA SHEET Employee completes</p>	<ul style="list-style-type: none"> <input type="checkbox"/> Referral Source <input type="checkbox"/> Ethnicity information (this information is used for statistical purposes only)
<p style="text-align: center;">FORM I-9 (Version: Rev. 06/05/07)</p>	<ul style="list-style-type: none"> <input type="checkbox"/> Section 1- Completed and signed by employee Section 2- Completed and signed by supervisor/verifier Employee must present original documents for identity and employment eligibility verification (no copies or faxed documents should be accepted): One document that establishes identity and employment eligibility from LIST A or, One document that establishes identity from LIST B, and One document that establishes employment eligibility from LIST C ***Please refer to the listing of acceptable documents on the back of the I-9 Form — the verifier should make a copy of the documents and attach to the I-9 Form.
<p style="text-align: center;">OTHER FORMS NOTE: <u>Departments may require completion of additional forms</u></p>	<ul style="list-style-type: none"> <input type="checkbox"/> Cell Phone Agreement <input type="checkbox"/> Code of Safe Practices <input type="checkbox"/> Computer Usage Agreement <input type="checkbox"/> Fingerprint PR Deduction Agreement <input type="checkbox"/> New Hire Packet for NRA International Students <input type="checkbox"/> Operating Vehicles Policy Agreement <input type="checkbox"/> *Unexpired Proof of Insurance (only if driving personal vehicle for A.S. business) <input type="checkbox"/> **Auto Insurance Coverage Verification (only if employee's name is not listed on the insurance card) <input type="checkbox"/> Parking Permit PR Deduction Agreement (FT Employees "only") <input type="checkbox"/> Program Area Deposit Procedures <input type="checkbox"/> Safety Orientation Checklist