

## Student Employment Hiring Packet

Congrats on getting a student employment position!

**PLEASE READ & RETAIN THESE INSTRUCTIONS IN THEIR ENTIRETY SO YOU CAN GET PAID.**

Complete this packet of documents as soon as possible and return it back to your department so that we can get you hired. You must complete these forms BEFORE you begin working, not after! Adobe Scan is a really great app for your phone that you can use if you do not have a scanner; it turns anything you take a photo of into a PDF. You can also complete these forms on paper and take them back to your hiring department.

Enclosed you will find:

- Student Hire Certification
- Employment Eligibility Verification Form I-9
- Statement Concerning your Employment in a Job Not Covered by Social Security

Information on what each of these forms are and how to complete them are in the **New Student Employee Orientation (and in the Student Employee Handbook)** at [www.clestatecareers.com/ocsestudent](http://www.clestatecareers.com/ocsestudent)

For the Student Hire Certification:

- Read, Sign, and complete the information required
- You must SIGN your name with your actual, handwritten signature on the signature line. You cannot type your name as your signature.

For the Employment Eligibility Verification Form I-9:

- Complete Section 1.
- If you are an International Student on an F-1 visa, you should check box #4 (an alien authorized to work) NOT #2. The expiration date is the date that your I-20 form expires.
- You must sign and date this form and check if you used a preparer/translator
- You must SIGN your name with your actual, handwritten signature on the signature line. You cannot type your name as your signature.
- You are required to provide documents from the Lists of Acceptable Documents sheet. You must choose one item from List A, or if you do not have a List A document, then you must choose both a List B AND a List C document to provide. You will need to scan the

front and back of each document you choose so that your department can complete an additional portion of this form with that information.

- International students: You will need to provide your Passport, I-94 printout, and I-20 form

For the Statement Concerning Your Employment in a Job Not Covered by Social Security:

- Fill out your name and Social Security Number (in the spot where it says Employee ID#)
- International Students: if you do not yet have a social security number, leave the Employee ID# line blank. (Instructions on how to apply for an SSN are located at [www.clestatecareers.com/ocsestudent](http://www.clestatecareers.com/ocsestudent) in both the Various Forms/Instructions section and in the Student Employee Handbook.)
- Sign and date at the bottom
- You must SIGN your name with your actual, handwritten signature on the signature line. You cannot type your name as your signature.
- Beneath your signature, write in your CSU ID#.

Once you've returned these forms to your department, they will complete some additional paperwork and forward it all to the Student Employment Office. Then the Student Employment Office will enter the paperwork into the payroll system and you will begin to show up in Kronos to record your time worked.

Within about a week of this, you will then receive an email to your CSU Vikes email address from HR referencing Payroll on-boarding with a link for you to complete your tax forms and your banking information for direct deposit of your paycheck. Another email will follow from OPERS confirming that you are now a public employee. CHECK YOUR SPAM/JUNK FOLDERS FOR THESE EMAILS! If you wish to opt out of OPERS, you MUST download the app mentioned in that email and complete an exemption form, and you MUST do that within 30 days of your start date or you will lose your opportunity to do so. You will pay into OPERS until you do this. Note: the email address you must use for OPERS is your CSU Vikes email address, otherwise the system will not recognize you! The New Student Employee Orientation explains each of these online forms that you must complete, so be sure to view that so you understand!

This entire process usually takes about a week, assuming all documents are completed correctly and sent timely to the Student Employment Office.

**Be sure to read the New Student Employee Orientation and the Student Employee Handbook** so that you know how to log in to Kronos, how to determine when your paychecks will be issued, and what the rules and expectations are for working as a student employee. You should also be sure each semester to ask your supervisor to orient you to your job duties and department expectations, as each job is different. This includes the schedule they want you to work as well as the tasks they hired you to do. Do not wait for them to offer this information,

as sometimes they might assume you just know. It is your responsibility to ask for clarification of all job expectations and requirements.

We hope that your experience working as a student employee is a positive one! What you will be learning in this job can be transferred to future positions and will help your professional development. We encourage you to do your best and take advantage of all the networking opportunities this position offers. The Office of Career Development & Exploration can help you expand this more, so feel free to make an appointment with your Career Specialist as well!

**Student Employment Office**  
**[studentemploy@csuohio.edu](mailto:studentemploy@csuohio.edu)**  
**[www.clestatecareers.com/studentemployment](http://www.clestatecareers.com/studentemployment)**

*Rev 0822*

## Student Hire Certification

(Student Employee Must Read and Sign for each position they are hired/rehired into)

By accepting this student employment position, I acknowledge, understand, and agree that:

- I must complete the required hire forms in the Student Employment Hiring Packet at [www.clestatecareers.com/ocsestudent](http://www.clestatecareers.com/ocsestudent) before working
- It is my responsibility to respond timely to any emails from the Payroll department/HR or OPERS regarding online completion of tax, direct deposit, and retirement fund (OPERS) contributions as per the instructions in the Student Employee Hiring Packet
- Payroll cannot be processed until these forms are accurately completed and received
- I have reviewed the Student Employee Handbook at [www.clestatecareers.com/ocsestudent](http://www.clestatecareers.com/ocsestudent)
- I must abide by the rules and regulations listed in the Student Employee Handbook in order to maintain my eligibility to work and remain employed at CSU as a student employee
- I must maintain enrollment in at least 6 credit hours each Fall and Spring semester
- I cannot work over 20 hrs/week during Fall/Spring semesters or 40 hrs/week during Winter/Spring/Summer breaks
- I cannot work during my scheduled class times (as determined by the course listing in CampusNet and the CSU academic calendar)
- I will record my time correctly in accordance with University policy in the Kronos timekeeping system, following the Kronos instructions located at [www.clestatecareers.com/ocsestudent](http://www.clestatecareers.com/ocsestudent)
- Student employment positions are considered temporary, part-time, and contingent upon me remaining a student in good standing
- Student employment positions are "at will" employment which I may quit at any time as well as be released from at any time
- Student employment positions are positions that do not qualify for state or federal unemployment compensation
- I will keep confidential and refrain from disclosing any student or University information except as directed by my supervisor.
- Any violation of confidentiality may result in disciplinary action, including termination of my employment
- I will retain a copy of this certification form to refer to while employed at this job.

Student Signature \_\_\_\_\_

Date \_\_\_\_\_

CSU ID \_\_\_\_\_

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**Employment Eligibility Verification**  
**Department of Homeland Security**  
 U.S. Citizenship and Immigration Services

**USCIS**  
**Form I-9**  
 OMB No. 1615-0047  
 Expires 10/31/2022

▶ **START HERE: Read instructions carefully before completing this form. The instructions must be available, either in paper or electronically, during completion of this form. Employers are liable for errors in the completion of this form.**

**ANTI-DISCRIMINATION NOTICE:** It is illegal to discriminate against work-authorized individuals. Employers **CANNOT** specify which document(s) an employee may present to establish employment authorization and identity. The refusal to hire or continue to employ an individual because the documentation presented has a future expiration date may also constitute illegal discrimination.

**Section 1. Employee Information and Attestation** *(Employees must complete and sign Section 1 of Form I-9 no later than the first day of employment, but not before accepting a job offer.)*

Last Name (Family Name)		First Name (Given Name)		Middle Initial	Other Last Names Used (if any)	
Address (Street Number and Name)			Apt. Number	City or Town		State ZIP Code
Date of Birth (mm/dd/yyyy)	U.S. Social Security Number [ ][ ] - [ ][ ] - [ ][ ][ ][ ]		Employee's E-mail Address		Employee's Telephone Number	

**I am aware that federal law provides for imprisonment and/or fines for false statements or use of false documents in connection with the completion of this form.**

**I attest, under penalty of perjury, that I am (check one of the following boxes):**

<input type="checkbox"/> 1. A citizen of the United States	
<input type="checkbox"/> 2. A noncitizen national of the United States <i>(See instructions)</i>	
<input type="checkbox"/> 3. A lawful permanent resident (Alien Registration Number/USCIS Number): _____	
<input type="checkbox"/> 4. An alien authorized to work until (expiration date, if applicable, mm/dd/yyyy): _____ Some aliens may write "N/A" in the expiration date field. <i>(See instructions)</i>	
<p><i>Aliens authorized to work must provide only one of the following document numbers to complete Form I-9: An Alien Registration Number/USCIS Number OR Form I-94 Admission Number OR Foreign Passport Number.</i></p> <p>1. Alien Registration Number/USCIS Number: _____  <b>OR</b>          2. Form I-94 Admission Number: _____  <b>OR</b>          3. Foreign Passport Number: _____          Country of Issuance: _____</p>	
QR Code - Section 1 Do Not Write In This Space	

Signature of Employee	Today's Date (mm/dd/yyyy)
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**Preparer and/or Translator Certification (check one):**

I did not use a preparer or translator.     A preparer(s) and/or translator(s) assisted the employee in completing Section 1.  
*(Fields below must be completed and signed when preparers and/or translators assist an employee in completing Section 1.)*

**I attest, under penalty of perjury, that I have assisted in the completion of Section 1 of this form and that to the best of my knowledge the information is true and correct.**

Signature of Preparer or Translator		Today's Date (mm/dd/yyyy)	
Last Name (Family Name)		First Name (Given Name)	
Address (Street Number and Name)		City or Town	State ZIP Code



*Employer Completes Next Page*



**LISTS OF ACCEPTABLE DOCUMENTS**  
**All documents must be UNEXPIRED**

Employees may present one selection from List A  
or a combination of one selection from List B and one selection from List C.

<b>LIST A</b> <b>Documents that Establish Both Identity and Employment Authorization</b>	<b>OR</b>	<b>LIST B</b> <b>Documents that Establish Identity</b>	<b>AND</b>	<b>LIST C</b> <b>Documents that Establish Employment Authorization</b>
<ol style="list-style-type: none"> <li>1. U.S. Passport or U.S. Passport Card</li> <li>2. Permanent Resident Card or Alien Registration Receipt Card (Form I-551)</li> <li>3. Foreign passport that contains a temporary I-551 stamp or temporary I-551 printed notation on a machine-readable immigrant visa</li> <li>4. Employment Authorization Document that contains a photograph (Form I-766)</li> <li>5. For a nonimmigrant alien authorized to work for a specific employer because of his or her status: <ol style="list-style-type: none"> <li>a. Foreign passport; and</li> <li>b. Form I-94 or Form I-94A that has the following: <ol style="list-style-type: none"> <li>(1) The same name as the passport; and</li> <li>(2) An endorsement of the alien's nonimmigrant status as long as that period of endorsement has not yet expired and the proposed employment is not in conflict with any restrictions or limitations identified on the form.</li> </ol> </li> </ol> </li> <li>6. Passport from the Federated States of Micronesia (FSM) or the Republic of the Marshall Islands (RMI) with Form I-94 or Form I-94A indicating nonimmigrant admission under the Compact of Free Association Between the United States and the FSM or RMI</li> </ol>	<ol style="list-style-type: none"> <li>1. Driver's license or ID card issued by a State or outlying possession of the United States provided it contains a photograph or information such as name, date of birth, gender, height, eye color, and address</li> <li>2. ID card issued by federal, state or local government agencies or entities, provided it contains a photograph or information such as name, date of birth, gender, height, eye color, and address</li> <li>3. School ID card with a photograph</li> <li>4. Voter's registration card</li> <li>5. U.S. Military card or draft record</li> <li>6. Military dependent's ID card</li> <li>7. U.S. Coast Guard Merchant Mariner Card</li> <li>8. Native American tribal document</li> <li>9. Driver's license issued by a Canadian government authority</li> <li><b>For persons under age 18 who are unable to present a document listed above:</b></li> <li>10. School record or report card</li> <li>11. Clinic, doctor, or hospital record</li> <li>12. Day-care or nursery school record</li> </ol>	<ol style="list-style-type: none"> <li>1. A Social Security Account Number card, unless the card includes one of the following restrictions: <ol style="list-style-type: none"> <li>(1) NOT VALID FOR EMPLOYMENT</li> <li>(2) VALID FOR WORK ONLY WITH INS AUTHORIZATION</li> <li>(3) VALID FOR WORK ONLY WITH DHS AUTHORIZATION</li> </ol> </li> <li>2. Certification of report of birth issued by the Department of State (Forms DS-1350, FS-545, FS-240)</li> <li>3. Original or certified copy of birth certificate issued by a State, county, municipal authority, or territory of the United States bearing an official seal</li> <li>4. Native American tribal document</li> <li>5. U.S. Citizen ID Card (Form I-197)</li> <li>6. Identification Card for Use of Resident Citizen in the United States (Form I-179)</li> <li>7. Employment authorization document issued by the Department of Homeland Security</li> </ol>		

**Examples of many of these documents appear in the Handbook for Employers (M-274).**

**Refer to the instructions for more information about acceptable receipts.**

**Statement Concerning Your Employment in a Job  
Not Covered by Social Security**

**Employee Name** \_\_\_\_\_

**Employee ID# (SSN)** \_\_\_\_\_

**Employer Name** Cleveland State University

**Employer ID#** 34-0966056

Your earnings from this job are not covered under Social Security. When you retire, or if you become disabled, you may receive a pension based on earnings from this job. If you do, and you are also entitled to a benefit from Social Security based on either your own work or the work of your husband or wife, or former husband or wife, your pension may affect the amount of the Social Security benefit you receive. Your Medicare benefits, however, will not be affected. Under the Social Security law, there are two ways your Social Security benefit amount may be affected.

**Windfall Elimination Provision**

Under the Windfall Elimination Provision, your Social Security retirement or disability benefit is figured using a modified formula when you are also entitled to a pension from a job where you did not pay Social Security tax. As a result, you will receive a lower Social Security benefit than if you were not entitled to a pension from this job. For example, if you are age 62 in 2005, the maximum monthly reduction in your Social Security benefit as a result of this provision is \$313.50. This amount is updated annually. This provision reduces, but does not totally eliminate, your Social Security benefit. For additional information, please refer to Social Security Publication, "Windfall Elimination Provision."

**Government Pension Offset Provision**

Under the Government Pension Offset Provision, any Social Security spouse or widow(er) benefit to which you become entitled will be offset if you also receive a Federal, State or local government pension based on work where you did not pay Social Security tax. The offset reduces the amount of your Social Security spouse or widow(er) benefit by two-thirds of the amount of your pension.

For example, if you get a monthly pension of \$600 based on earnings that are not covered under Social Security, two-thirds of that amount, \$400, is used to offset your Social Security spouse or widow(er) benefit. If you are eligible for a \$500 widow(er) benefit, you will receive \$100 per month from Social Security (\$500 - \$400=\$100). Even if your pension is high enough to totally offset your spouse or widow(er) Social Security benefit, you are still eligible for Medicare at age 65. For additional information, please refer to Social Security Publication, "Government Pension Offset."

**For More Information**

Social Security publications and additional information, including information about exceptions to each provision, are available at [www.socialsecurity.gov](http://www.socialsecurity.gov). You may also call toll free 1-800-772-1213, or for the deaf or hard of hearing call the TTY number 1-800-325-0778, or contact your local Social Security office.

**I certify that I have received Form SSA-1945 that contains information about the possible effects of the Windfall Elimination Provision and the Government Pension Offset Provision on my potential future Social Security benefits.**

**Signature of Employee** \_\_\_\_\_

**Date** \_\_\_\_\_

CSU ID # = \_\_\_\_\_

## **Information about Social Security Form SSA-1945 Statement Concerning Your Employment in a Job Not Covered by Social Security**

New legislation [Section 419(c) of Public Law 108-203, the Social Security Protection Act of 2004] requires State and local government employers to provide a statement to employees hired January 1, 2005 or later in a job not covered under Social Security. The statement explains how a pension from that job could affect future Social Security benefits to which they may become entitled.

Form SSA-1945, **Statement Concerning Your Employment in a Job Not Covered by Social Security**, is the document that employers should use to meet the requirements of the law. The SSA-1945 explains the potential effects of two provisions in the Social Security law for workers who also receive a pension based on their work in a job not covered by Social Security. The Windfall Elimination Provision can affect the amount of a worker's Social Security retirement or disability benefit. The Government Pension Offset Provision can affect a Social Security benefit received as a spouse or an ex-spouse.

Employers must:

- Give the statement to the employee prior to the start of employment;
- Get the employee's signature on the form; and
- Submit a copy of the signed form to the pension paying agency.

Social Security will not be setting any additional guidelines for the use of this form.

Copies of the SSA-1945 are available online at the Social Security website, [www.socialsecurity.gov/form1945](http://www.socialsecurity.gov/form1945). Paper copies can be requested by email at [oplm.oswm.rqct.orders@ssa.gov](mailto:oplm.oswm.rqct.orders@ssa.gov) or by fax at 410-965-2037. The request must include the name, complete address and telephone number of the employer. Forms will not be sent to a post office box. Also, if appropriate, include the name of the person to whom the forms are to be delivered. The forms are available in packages of 25. Please refer to Inventory Control Number (ICN) 276950 when ordering.