

KANSAS STATE UNIVERSITY
HOURLY STUDENT DATA SHEET

Notification - Required SSN Disclosure: Used for tax withholding, record keeping, and government reporting. Solicited per K.S.A. 76-725.

NAME: (First, Middle, Last, Suffix)		*SSN
DEPT ID	DEPT NAME	eID

EMPLOYEE ID	RCD#	FORMER NAME (Name Change Only)
EFFECTIVE DATE	END OF APPT DATE	MARITAL STATUS

HIRE	ADD CONCURENT JOB	UPDATE	CORRECTION	TERMINATE
------	-------------------	--------	------------	-----------

HOME ADDRESS (Local Address)		Ethnic Groups (Mark all that apply)	
COUNTRY		Hispanic or Latino?	Yes <input type="checkbox"/> No <input type="checkbox"/>
ADDRESS 1		ETHNIC GROUP:	American Indian or Alaska Native
ADDRESS 2			Asian
CITY			Black or African American
COUNTY	ZIPCODE		Native Hawaiian or Pacific Islander
STATE	HOME PHONE		White

GENDER	HIGHEST EDUCATION LEVEL	BIRTHDATE
MILITARY STATUS		

CITIZENSHIP STATUS	(If employee is not a U.S. Citizen, complete Visa information and attach a PER-15)		
VISA TYPE	ISSUE DATE	EXPIRATION DATE	ARRIVAL DATE

ACTION	REASON	POSITION #	JOB CODE	035000	FTE
REPORTS TO POSITON #: (OPT)		TAX LOCATION	SUBJECT TO FICA?	YES <input type="checkbox"/> NO <input type="checkbox"/>	NO <input type="checkbox"/>
HOURLY COMP RATE		COLLEGE WORK STUDY (CWSP)?	YES <input type="checkbox"/> NO <input type="checkbox"/>		

PREVIOUS EMPLOYMENT: If appointee has been previously or is currently employed by state or local government, or any other state agency including KSU, give agency name(s), dates of employment, and employee id (if known):

ADDITIONAL INFORMATION:

FUNDING INFORMATION: Updated by Departments in HRIS. For department use only. *EOS = END OF SOURCE

PROJECT #	PROJECT DESCRIPTION	FUND SOURCE	ORG	AWARD (If applicable)	FTE	*EOS DATE

EMPLOYEE OATH

(K.S.A. 75-4308) I do solemnly (swear) (affirm) that I will support the Constitution of the United States and the Constitution of the State of Kansas and faithfully discharge the duties of my office or employment. So help me God.

Employee's signature _____

Affix notary seal here

SUBSCRIBED AND SWORN TO before me this _____ day of _____ 20_____

Notary Public _____

HOURLY STUDENT CERTIFICATIONS

- I will limit my total hours of work for all departments as follows: a) during the academic year to 30 hours in weeks when classes and/or final exams are in session 3 full days or more, to 40 hours during other weeks; b) during summer to 30 hours per week while enrolled in 4 or more credit hours; to 40 hours during other weeks; c) if a holder of an F-1 visa during the academic year to 20 hours except in weeks with student recesses, to 30 hours during summers while enrolled in 4 or more credit hours, to 40 hours during other weeks. I understand that if I do work over 40 hours per week, I will be compensated at an overtime rate for the hours over 40 and I must notify all departments for which I work for during that week.
- I am at least 16 years old (18 years old for employment in University Facilities) and will remain enrolled in at least 6 credit hours at KSU while employed during a fall or spring term. If employed during the summer, I will a) remain enrolled in at least 1 credit hour at KSU or b) been enrolled in at least 6 credit hours at KSU during the preceding spring or 3) be pre-enrolled in the upcoming fall in at least 6 credit hours or 4) be admitted to study in the upcoming fall. I understand that Social Security tax will be deducted during the summer if I am not enrolled in at least 3 credit hours at KSU.

EMPLOYEE SIGNATURE _____ DATE _____

SIGNATURE(S) OF UNIT OR DEPARTMENT HEAD, DEAN AND/OR VICE PRESIDENT _____ DATE _____