



STUDENT EMPLOYMENT HIRING FORM
(For Approved Exceptions to CampusWorks Hiring)

SECTION I - DEPARTMENT MUST COMPLETE PRIOR TO STUDENT BEGINNING EMPLOYMENT FOR PAYCHECK GENERATION

DEPARTMENT NAME	POSITION NUMBER	INDEX NUMBER
PAY LEVEL (See online Student Employment Pay Plan for ranges) ____ ENTRY LEVEL ____ INTERMEDIATE LEVEL ____ HIGHLY SPECIALIZED LEVEL	DATES OF EMPLOYMENT PERIOD BEGIN DATE _____ END DATE _____	PAY TYPE HOURLY: Amount per hr: \$ _____ NON-HOURLY: Total amount: \$ _____
		WORK HOURS PER WEEK _____
SUPERVISOR NAME (For Timekeep Purposes)	SUPERVISOR FLASHLINE ID	SUPERVISOR PHONE
I understand that by submitting this Student Employment Hiring Form, I am indicating that I have read and understand student employment policies in the Student Employment Handbook and University Policy Register, and I intend to hire and employ this student.		
Authorized Department Signature	Printed Name	Date

SECTION II - STUDENT MUST COMPLETE PRIOR TO BEGINNING EMPLOYMENT

Please print LEGAL name.

LAST NAME _____ FIRST NAME _____ MI _____

FLASHLINE USERNAME _____ KENT STATE ID NUMBER _____

PERMANENT ADDRESS _____ CITY _____ STATE _____ ZIP _____

PHONE NUMBER _____ EMAIL _____

(Circle one for each category) GENDER Male Female	(Circle one) RACE Asian or Pacific Islander Hispanic African American Caucasian Native American/Alaskan Native Other	(Circle one) OPERS SELECTION (Ohio Public Employees Retirement System) Contribute Waive You are REQUIRED to contribute to OPERS unless you meet the minimum credit hour requirement (6 undergrad hours/4 graduate hours) in the semester in which you will be working.
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My signature indicates that I have read and understand the Student Employment Certification Statement on the reverse side of this form.

SIGNATURE _____ **DATE** _____

SECTION III - CAREER SERVICES OR REGIONAL CAMPUS REPRESENTATIVE VERIFICATION OF EMPLOYMENT ELIGIBILITY

STUDENT TYPE (Check all that apply) ____ High School Student ____ Initial ____ Additional	TERM OF APPOINTMENT ____ Fall ____ Spring ____ Summer	REGISTRATION Credit Hrs Registered: _____	CS/RC STAFF Name _____ Date _____
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**Return to: Career Services Center, 261 Schwartz Center,
campusworks@kent.edu, 330-672-2057 (fax)**

To work as a student employee on campus, you must have agreed to the "Student Employment Certification Statement" and "Acknowledgement of Receipt for the Secured Use and Confidentiality of University Records and Data" by SIGNING THIS FORM.

STUDENT EMPLOYMENT CERTIFICATION STATEMENT

I understand, as a student employee, that:

1. I agree to comply with all federal and state laws and all University policies;
2. an individual is a student if education, not employment, is the predominant aspect of the employee's relationships with the employer. Students employed through the On-Campus Student Employment Program must maintain HALF-TIME enrollment status (six credit hours for undergraduate students and four credit hours for graduate students) during fall and spring semester enrollment;
3. if I drop below HALF-TIME credit hours (six credit hours for undergraduate students and four credit hours for graduate students), my employment with the university will be terminated immediately;
4. my employment during any active assignment period is subject to meeting enrollment requirements, my job performance, departmental staffing needs, university and/or departmental budgetary considerations, and my adherence to established university and/or departmental policies and procedures;
5. if I am a Federal Work-Study (FWS) student employee, my hours per week will be dictated by my Federal Work Study award as determined by the Student Financial Aid Office, my assignment will be terminated when I earn my FWS limit unless renewed by the department, and that FWS funding will be terminated if I cease to be enrolled at least HALF-TIME during the fall and spring semester;
6. I agree, as a condition of employment, to authorize Kent State University to automatically deposit my paycheck, including any Federal Work Study earnings, into my designated bank account or a university approved stored-value card, in accordance with Volume 4, Chapter 1 (Disbursing Federal Student Aid (FSA) Funds), of the [Federal Student Aid Handbook](#);
7. I agree to work no more than the 28 maximum hours permitted per week as established by [university policy](#), and understand that violation of this policy will result in immediate termination of employment;
8. if I am a full-time international student on a F Visa, U.S. Federal regulations do not allow me to work more than 20 hours per week while school is in session and that a violation of this regulation may immediately affect my nonimmigrant status.
9. I agree to be bound by any additional terms and conditions of employment established by my employing department and that the employing department will assign my duties;
10. my employment in certain positions may be dependent on the outcome of a background check;
11. summer employment is contingent upon my enrollment during the following fall semester unless I am enrolled half-time for summer or graduating in August; and if I am not enrolled during the summer, I am required to contribute to OPERS;
12. I can only request to waive my contribution to OPERS by completing an OPERS "Request for Optional Exemption as a Student" in accordance with the [Ohio Revised Code Section 145.03](#);
13. Career Services will release my dates and department of employment, and rate of pay to individual inquiries unless I request to restrict disclosure of this information;
14. If I am a university athlete, I must first complete a "Student-Athlete Employment Verification Form," available from the Athletic Department, and I must comply with specific NCAA procedures and regulations regarding my eligibility to receive employment earnings.
15. I will abide by the [ACKNOWLEDGEMENT OF RECEIPT FOR THE SECURED USE AND CONFIDENTIALITY OF UNIVERSITY RECORDS AND DATA](#), which states:

All persons accessing KSU institutional data hold a position of trust relative to student and University information in any form and must recognize the responsibilities entrusted to them in preserving the security and confidentiality of this information. Kent State University also recognizes its obligation to uphold student privacy rights under the Family Educational Rights and Privacy Act of 1974 (FERPA), the Gramm-Leach-Bliley Act (GLBA), the Health Insurance Portability and Accountability Act (HIPAA), Ohio Revised Code Section 102, and all other Federal and State laws and regulations governing the security and confidentiality of information used in our operations. Therefore, in this regard:

I, the undersigned, acknowledge that I understand and agree to adhere to the following statements:

- I am familiar with the Kent State University policies [5-08.101](#): Operational procedures and regulations regarding collection, retention and dissemination of information about students, and [5-08.102](#): Operational procedures and regulations regarding release of name and address listings, for administering and maintaining student education records.
- I will use computing resources and data only for legitimate University business for which I am explicitly authorized; and I know that it is against University policy to peruse or use University records including, but not limited to, confidential information for my personal interest or advantage.
- I will not exhibit or divulge the contents of any record (paper or electronic) to any person except in the conduct of their work assignment in accordance with University and office policies; I will not knowingly include or cause to be included in any records or report a false, inaccurate or misleading entry; I will not aid, abet, or act in conspiracy with another to violate any part of this agreement or the referenced Federal and State laws and regulations.
- I will report security and privacy violations.
- I understand that access to information will be granted only on a strict "need-to-know" basis, the determination of which will be made by the data stewards(s) in cooperation with the individual's security administrator.
- I understand that assigned computing system USERID(s) and associated password(s) are to be considered highly confidential and are not to be shared, communicated, or made easily accessible to anyone.
- I understand that violation of these statements may lead to reprimand, suspension, dismissal or other disciplinary action consistent with the general personnel policies of the University.
- I understand that responsibility for confidentiality continues after I leave a position of affiliation with Kent State University. Pursuant to the Ohio Revised Code, Chapter 102.03(B), I understand that disclosure of confidential information by present or former public officials or public employees may constitute a violation of state statute; conviction of which is a first-degree misdemeanor (up to six months imprisonment and/or \$1000 fine). (*Version 1.3, Last Revised: 3/8/2011*)