

NEW STUDENT EMPLOYEE DATA

ID _____ Name _____,
LAST FIRST

U.S. Social Security Number: _____ - _____ - _____ Date of Birth ____/____/_____

Ethnicity (Please select one): Not Hispanic or Latino Hispanic of Any Race

Race (Check all that apply): 1 Black or African American 3 Asian 5 White
 2 American Indian/Alaskan Native 4 Native Hawaiian/ Pacific Islander

US Citizen? ____ Yes ____ No If not a US Citizen please provide the appropriate information:

Permanent Resident/Resident Alien: A# _____ Expiration Date: ____/____/_____

F1 I-20 Expiration Date: ____/____/_____ J1 DS2019 Expiration Date: ____/____/_____

J2 Employment Authorization Expiration Date: ____/____/_____

B1/B2 STOP! No work allowed unless employment authorization from INS

Other _____ Employment Authorization Expiration Date: ____/____/_____

Please list any relatives employed by the University or its auxiliary enterprises (if you have more than one, please list on back of form):

Name _____ Dept _____ Relationship _____

I understand and agree to the following:

- The I-9 Employment Eligibility Form must be completed on my date of hire or within 3 days of my date of hire and at that time I must present original documentation.
- If I do not have one, I must provide a social security number to this office within six weeks of my employment, otherwise a \$100 fee will be assessed to my school account after this deadline.
- If in a semester I am enrolled at least half-time (or in my last semester even if less than half-time), I will be exempted from FICA (Social Security and Medicare) income reporting and tax withholdings (IRS Treasury Decision 9167). If my enrollment falls below half-time status, this exemption no longer applies. For international students, this only applies if you are considered a resident alien for tax purposes.
- If I am a minor, I will need to complete the Michigan youth work permit and will ask the front desk for assistance.
- As an Andrews University student, my top priority is academics, therefore I am limited to work 20 hours/week.
- This employment is being provided to me as an Andrews University student for the purpose of providing financial assistance in fulfilling my financial obligations to the University.
- If possible and if I am eligible, I may be placed on the federal and/or michigan work study program.
- If I should discontinue being a full-time enrolled university student, it could result in the termination of my student employment.
- Andrews University has an ePay policy that requires me make an ePay election within 30 days of my date of hire. If I do not make an ePay election within the 30 days, I authorize Andrews University to pay any wages, including federal work study wages, on a payroll debit card.

Employee's Signature _____ Date ____/____/_____

BELOW THIS LINE FOR OFFICE USE ONLY

I-9 Completed ____/____/_____

Entered in Banner by _____