



Departments: To initiate the hiring process, please complete the first section of this form. Forms must be signed using a Digital Signature. After digitally signing, save it as a PDF, then email to **herediaa@wcsu.edu** until further notice.

For assistance in creating a digital signature, visit helpx.adobe.com/acrobat/using/digital-ids.html.

HIRING DEPARTMENT INFORMATION	* If funding is from an external source other than the hiring department, approval of this
Department Name:	
Core-CT Time Reporter Group:	Core-CT Position Number:
Dept. Approver:	Dept. Approver (Alternate):
Employee Status: New (Never worked on campus; Must complete forms with HR) Returning	
Banner ID: Student N	Name:
	Last First
Student WCSU Email:	@wcsu.edu Must use WCSU Email for Core-CT
Employment Term: (check one)	☐ Fall Only ☐ Spring Only ☐ Summer
Suggested Hourly Rate: \$	Desired Starting Date:
Note: Minimum rate is \$13.00 Please enter dollar amount	Students should not begin working prior to this date Please enter date
Will your student employee have access to or handle any of the following data: SSNs, Bank Account or Debit Card Information, Credit Card Numbers & Card Holder Information or Student Loan Data?	
Department Supervisor Signature:	Date:
FINANCIAL AID & STUDENT EMPLOYMENT	
Core-CT Position Number:	☐ Work Study ☐ Graduating* Must end by June 30
Verified Hourly Rate: \$ Matricula	ated Credit Hours:
Pay Period Start Date:	Pay Period End Date:
FASE Approval Signature:	Date:
HUMAN RESOURCES DEPARTMENT	
Record Number:	Employee ID:
FICA Status: Exempt (Academic Year)	
☐ Subject (Summer Only) ☐ Exen	mpt (Summer – 6 cr. or more) ☐ Exempt (International Student)
Check Once Completed: ☐ Entered in Core ☐ Emai	iled Log-in Credentials to Student Employee & Supervisor
Human Resources Approval Signature:	Date: