STUDENT EMPLOYEE
DATA COLLECTION FORM

EFFECTIVE DATE: _____-_____-_____

Day   Month   Year

BIOGRAPHICAL DATA – To be completed by the employee.

Name:_____Title:_____

Last   First   Middle

Gender: _____Male _____Female   Type: <u>Employee</u>   Social Security #:_____

Birthdate:_____-_____-_____Visa Type:_____

(Legacy ID)   Day - Month - Year

Local
Address:_____

City:_____ State _____Zip Code:_____

Phone Number:_____ Email Address_____

Enrolled in TIAA-CREF?   Y or N   Emergency Contact and Phone_____

Circle one

Relationship to you   _____

W-2 Address (if different than above)

Street_____

City:_____ State_____ Zip Code:_____

HIRING DATA – To be completed by the department.

SWG (State work-study student--match from Federal funds) YES_____   Dept. Name: <u>NREL</u>   Employee Group: <u>Student</u>

Employee Qualifier: Work-Study   or   Non Work-Study

(Please Circle Correct Designation)

Job Classification Code #: _____Title:_____

Pay Grade: _____   Payroll: <u>Bi-Weekly</u>   Employment Category: <u>Temporary</u>

Hourly Salary: _____

Supervisor:_____

ACCOUNT INFORMATION – To be completed by the department.

CSU FUND NUMBER	Start Date	End Date	Percent
1. _____	_____	_____	_____
2. _____	_____	_____	_____
3. _____	_____	_____	_____
4. _____	_____	_____	_____
5. _____	_____	_____	_____

NOTE: The I-9 forms must be sent to Student Employment Services. The W-4 and Payment Disposition Action (PDA) forms must be sent directly to the Payroll Office.