

# Employment Forms

HOW TO COMPLETE FORMS

# Student Assistantship Form: How-To

Student will complete all fields. If they have not worked on campus before, have them send me an email to schedule a time to meet. I will pass along necessary information for additional paperwork.

Select which type of appointment is appropriate. The Pay Scale column has the hourly rate based on the student's year.

Complete all fields. The course number/section is only left blank if hiring an RA. The Account/Cost Center is the 10 digit SAP number.

Students are hired one semester at a time (unless an RA). If employment does not fit semester dates, select Other.

Primary supervisor signs. If the position is funded by the TA budget, the Department Authorization is Norm Blanchard. If funded directly by a research account or the department, it is signed by the department chair.



## STUDENT ASSISTANTSHIP FORM (CURRICULUM SUPPORT or RESEARCH)

Note: ALL sections of this form must be completed. Incomplete forms will be returned.

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### EMPLOYEE PERSONAL INFORMATION

**ARE YOU:**  Undergraduate  Graduate  Doctoral  
**WORK AUTHORIZATION STATUS:**  U.S. Citizen/Permanent Resident  
 Visa - Country of Citizenship: \_\_\_\_\_  
**WORKED ON CAMPUS BEFORE?**  Yes  No\*\*  
\*\*Please contact the Sr. Payroll Coordinator for additional hire paperwork

\_\_\_\_\_  
 \_\_\_\_\_

**Last Name** \_\_\_\_\_ **First Name** \_\_\_\_\_ **BUID** \_\_\_\_\_  
 \_\_\_\_\_

**Local Address** \_\_\_\_\_ **City** \_\_\_\_\_ **State** \_\_\_\_\_ **Zip Code** \_\_\_\_\_  
 \_\_\_\_\_

**Email** \_\_\_\_\_ **Phone Number** \_\_\_\_\_

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### WORK ASSIGNMENT

Type of Appointment (check one):		Pay Scale
<input type="checkbox"/> <b>Proctor</b>	A registered student whose duties include helping to administer exams (including distribution, collection, and verification of identity), helping the instructor maintain academic integrity at exams, and serving as a witness should an incident of alleged academic misconduct occur.	<b>Proctor:</b> <input type="checkbox"/> Undergraduate \$11.00 <input type="checkbox"/> Graduate \$15.00
<input type="checkbox"/> <b>Course Assistant:</b>	A registered student whose duties include conducting discussions sections or labs, grading assignments and multiple-choice exams, holding office hours for tutoring, and proctoring exams.	<b>Course Assistant:</b> <input type="checkbox"/> Undergraduate \$11.00 <input type="checkbox"/> Graduate \$15.00 <input type="checkbox"/> Doctoral \$15.00
<input type="checkbox"/> <b>Teaching Assistant:</b>	A registered student who performs the duties of a Course Assistant and serves as an instructional apprentice under the supervision of a faculty member.	<b>Teaching Assistant:</b> <input type="checkbox"/> Undergraduate \$12.00 <input type="checkbox"/> Graduate \$16.00 <input type="checkbox"/> Doctoral \$20.00
<input type="checkbox"/> <b>Research Assistant:</b>	A registered student who works with an individual faculty member on specific research project.	<b>Research Assistant:</b> <input type="checkbox"/> Undergraduate \$12.00 - \$14.00 <input type="checkbox"/> Graduate \$16.00 - \$18.00 <input type="checkbox"/> Doctoral \$20.00 - \$22.00

\_\_\_\_\_  
 \_\_\_\_\_

**Professor/Department** \_\_\_\_\_ **Course Number/Section** \_\_\_\_\_ **\$ Pay Rate** \_\_\_\_\_ **Approx. Hrs/Week** \_\_\_\_\_  
 \_\_\_\_\_

**Student's First Day of Work** \_\_\_\_\_ **Account/Cost Center** \_\_\_\_\_

**Employment Duration:**  
 Fall 2017 (9/4/17 - 1/14/18)  Spring 2018 (1/15/18 - 5/20/18)  Summer I 2018 (5/21/18 - 6/24/18)  Summer II 2018 (6/25/18 - 9/2/18)  Other (if dates do not align with semester)  
(Start Date: \_\_\_\_\_ End Date: \_\_\_\_\_)

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### AUTHORIZATION

\_\_\_\_\_  
 \_\_\_\_\_

**Supervisor's Name (print)** \_\_\_\_\_ **Supervisor's Signature** \_\_\_\_\_ **Date** \_\_\_\_\_  
 \_\_\_\_\_

**Department Authorization Name** \_\_\_\_\_ **Department Authorization Signature** \_\_\_\_\_ **Date** \_\_\_\_\_  
 \_\_\_\_\_

# Student Employment Form: How-To

Student completes. If they have not worked on campus before, have them send the Payroll Administrator an email to schedule a time to meet. They will pass along necessary information for additional paperwork.

Select the appropriate fields. Students are not automatically hired into a work-study position so please be sure to ask if they were given an award. Their award is intended to last the full academic year.

Paperwork should be submitted before the student's first day. The department determines the appropriate pay rate based on experience and responsibilities. The Account/Cost Center is the 10 digits SAP number. If not working the traditional semester dates, select "Other" and list dates.

The department chair will be the final signature. The primary and secondary supervisor will be listed to approve the student's hours on the Student Payroll website.

## Questrom School of Business

### STUDENT EMPLOYMENT/WORK STUDY FORM

Note: ALL sections of this form must be completed. Incomplete forms will be returned.

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**EMPLOYEE PERSONAL INFORMATION**

ARE YOU:  Undergraduate  Graduate  Doctoral  
 WORK AUTHORIZATION STATUS:  U.S. Citizen/Permanent Resident  
 Visa - Country of Citizenship: \_\_\_\_\_  
 WORKED ON CAMPUS BEFORE?  Yes  No\*\*  
\*\*Please contact the Sr. Payroll Coordinator for additional hire paperwork

\_\_\_\_\_  
 Last Name First Name BUID  
 \_\_\_\_\_  
 Local Address City State Zip Code  
 \_\_\_\_\_  
 Email Phone Number

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**WORK ASSIGNMENT**

New Hire  Rehire  
 Type of Work:  Departmental: 100% of student's salary is paid by the department  
 Work-study: an award granted through a student's Financial Aid package by the Federal Work-Study Program  
 Job #: \_\_\_\_\_  
 One-Time Payment: a student hired for a specific job lasting no longer than a week (ex: musician)  
\*\*\*Please Note: international students cannot be hired as a one-time payment  
 Total Compensation: \$ \_\_\_\_\_  
 Type of Work Completed: \_\_\_\_\_

\_\_\_\_\_  
 Student's First Day of Work Approx. Hours Per Week Pay Rate\*  
 \_\_\_\_\_  
 Department Account/Cost Center

Employment Duration:  
 Other (if dates do not align with semester) (Start Date: \_\_\_\_\_ End Date: \_\_\_\_\_)  
 Fall 2018 (9/3/18 - 1/20/19)  Spring 2019 (1/21/19 - 5/19/19)  Summer I 2019 (5/20/19 - 6/23/19)  Summer II 2019 (6/24/19 - 9/1/19)

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**AUTHORIZATION**

\_\_\_\_\_  
 Primary Supervisor's Name (print) Primary Supervisor's Signature Date  
 \_\_\_\_\_  
 Secondary Supervisor's Name (print)  
 \_\_\_\_\_  
 Department Authorization Signature Date



Employee will input all necessary information. All fields must be completed to be hired into the system.

Select "Yes" if the employee has worked for the University. If they have please list the school and department. If was previously employed as a student at the University, please select "No" but provide the BUID.

All fields must be completed. List the department employee will be hired into. The SAP account information is what will be charged for their hours. For employment duration, note that it can take up to a month to hire the employee so please submit the form with as much advance notice as possible.

Please complete all fields.

Input the employee's direct supervisor and the person responsible for making final budget decision on the account signs off as the final signature.

A memo further detailing the employee's responsibilities is required along with their resume. The employee will receive an email from the central HR office to complete their I-9 and W-4.

## QUESTROM SCHOOL OF BUSINESS TEMPORARY EMPLOYEE NEW HIRE FORM

**NAME:** \_\_\_\_\_ **SS#:** \_\_\_\_-\_\_\_\_-\_\_\_\_\_  
**ADDRESS:** \_\_\_\_\_ **BU ID#: U** \_\_\_\_\_  
**CITY:** \_\_\_\_\_ **D.O.B** MM/DD/YYYY \_\_\_\_\_  
**STATE:** \_\_\_\_\_ **ZIP CODE:** \_\_\_\_\_ **PHONE:** \_\_\_\_\_ **EMAIL:** \_\_\_\_\_

**HAS THIS PERSON PREVIOUSLY WORKED FOR BU BEFORE?**  Yes  No

If yes, where? \_\_\_\_\_ When? \_\_\_\_\_

**DEPARTMENT NAME:** \_\_\_\_\_  
**ACCOUNT / COST CENTER (SAP)** \_\_\_\_\_ **PAY RATE: \$** \_\_\_\_\_ per hour  
**EMPLOYMENT DURATION\*:** \_MM/DD/YYYY TO \_MM/DD/YYYY **HOURS PER WEEK:** \_\_\_\_\_

**POSITION TITLE:** \_\_\_\_\_  
**BRIEF DESCRIPTION OF JOB FUNCTIONS:** \_\_\_\_\_  
 \_\_\_\_\_

**SUPERVISOR'S NAME:** \_\_\_\_\_ **Tel #:** \_\_\_\_\_ **DATE:** \_\_\_\_\_

**DEPT'S AUTHORIZED SIGNATURE:** \_\_\_\_\_ **DATE:** \_\_\_\_\_  
 (Signature required)

**JUSTIFICATION:**  
 Please attach memo for temporary employment and résumé

**Dean's Office authorization is required prior to employment along with an Employment Eligibility (I-9) and Federal Tax Withholdings form (W-4) Please allow for 30 days to process paperwork.**

**Return completed form to:** Questrom's Office of the Dean  
 595 Comm. Ave, Rm 504D  
 T: (617) 353-9787

*For official use only*

**DEAN'S OFFICE SIGNATURE:** \_\_\_\_\_ **DATE:** \_\_\_\_\_

**ORG UNIT:** \_\_\_\_\_ **POSITION ID:** \_\_\_\_\_