

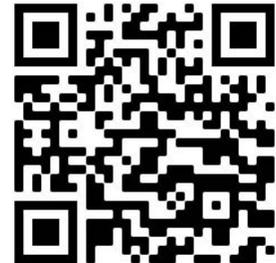
# Office of Student Employment

APPALACHIAN STATE UNIVERSITY

## U.S. Citizen & Permanent Resident Student Employee New-Hire Paperwork

Congrats on landing your first on campus job!

**In order to start work and be paid on time you must complete the new-hire process by following directions outlined below:**



Schedule an Appointment with Student Employment Staff via Handshake:

- Log onto Handshake using this link or QR code <https://app.joinhandshake.com>
- From the homepage of Handshake, click "Career Center"
- Select "Appointments" then "Schedule a New Appointment" with "Student Employment"
- Under "New-Hire Student Employee Processing" select an available date and time
- Once requested Student Employment staff will confirm in an email your scheduled processing time and location (please note that this **appointment is not conducted virtually or over zoom**)
- Report to Plemmons Student Union room 222

1. Student Temporary Authorization (to complete with your supervisor, page 2)  
2. I-9 documentation for employment verification, must be ORIGINAL and UNEXPIRED  
(see page 6 for the list of acceptable combinations)  
3. Section 1 of I9 (see page 5)  
4. NC-4EZ (State Tax Form, see page 4)  
5. W-4 (Federal Tax Form, see page 3)

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### Please have at your convenience:

- Your bank routing and account number - to complete the online direct deposit enrollment form on the [AppalNet](#) employee self-service tab

*This packet is for students who have secured employment on campus, not an application for employment.*

*Please contact our office for additional questions - [studentemployment@appstate.edu](mailto:studentemployment@appstate.edu) or 828-262-4099*

**Appalachian State University**  
**Student Temporary Employment Authorization – HOURLY WAGE**

*Please submit completed form to the Office of Student Employment for approval*

Student Name (last, first) \_\_\_\_\_ Banner ID \_\_\_\_\_

Permanent Address \_\_\_\_\_ AppState Email \_\_\_\_\_

(city, state, zip code) \_\_\_\_\_

Job Title \_\_\_\_\_ Hourly Wage \$ \_\_\_\_\_

Employing Department \_\_\_\_\_

Beginning date of Employment \_\_\_\_\_ Ending Date of Employment \_\_\_\_\_

**Budget Information (FOAP Code) --- all fields required**

Fund \_\_\_\_\_ Org \_\_\_\_\_ Account \_\_\_\_\_ Program \_\_\_\_\_

Time Sheet Org \_\_\_\_\_

- 1) Before reporting to work, all participants must have on file a Student Employment Authorization, the NC-4[EZ] and W-4 tax forms, and an I-9 form with printed confirmation of E-verify with either Appalachian State's Office of Student Employment or Office of Human Resources
- 2) Student temporary employees are under the immediate supervision of the person(s) in charge of their areas of assignment
- 3) Payrolls are due in the Controller's Office by the published payroll deadlines. All authorizations not properly submitted will be returned to the department.
- 4) Payroll checks will be issued on or before the 15<sup>th</sup> and the last working day of the month. If you owe Appalachian, it is subject to be deducted from the your paycheck. All student temporary employees are required to enroll in direct deposit via "Employee" tab of AppalNet.
- 5) Your employment as a student temporary employee is "at will". That is, just as you may resign from your employment with Appalachian at any time and for any reason, Appalachian may terminate your employment at any time and for any lawful reason.
- 6) Your employment in this position is contingent upon the continued availability of funds supporting this position.

**The following statement must be completed for all individuals:**

**Statement of Selective Service Registration Compliance**

\_\_\_ I certify that I am registered with Selective Service

\_\_\_ I certify that I am not required to be registered with selective service because

\_\_\_ I am female

\_\_\_ I am in the armed services on active duty (note: members of the Reserves & National Guard are not considered on active duty)

\_\_\_ I have not reached my 18<sup>th</sup> birthday

\_\_\_ I was born before 1960

\_\_\_ I am a permanent resident of the Trust Territory of the Pacific Islands (Palau) or Northern Mariana Islands

\_\_\_ I am a nonimmigrant alien

Statement: I understand I am not covered by unemployment insurance and I have read and understood the above statements.

Student Signature \_\_\_\_\_ Date \_\_\_\_\_

Supervisor Name \_\_\_\_\_ Supervisor Email \_\_\_\_\_

Supervisor Signature \_\_\_\_\_ Date \_\_\_\_\_

\*Disclosure of employees' social security number is mandatory. Appalachian State University is authorized or required by federal law (including 26 U.S.C. 6011 and 26 U.S.C. 6051) to obtain your social security number for employment and tax purposes. The university will use your social security number to comply with federal employment tax laws and regulations.

<p><b>For Office of Student Employment Use Only:</b></p> <p><input type="checkbox"/> EPAF</p> <p><input type="checkbox"/> TCP</p> <p><input type="checkbox"/> WS Overage</p>
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<p><b>For Payroll Department Use Only:</b></p>
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# Employee's Withholding Certificate

**2022**

▶ **Complete Form W-4 so that your employer can withhold the correct federal income tax from your pay.**  
 ▶ **Give Form W-4 to your employer.**  
 ▶ **Your withholding is subject to review by the IRS.**

<b>Step 1:</b> <b>Enter Personal Information</b>	(a) First name and middle initial	Last name	(b) Social security number
	Address		▶ <b>Does your name match the name on your social security card?</b> If not, to ensure you get credit for your earnings, contact SSA at 800-772-1213 or go to <a href="http://www.ssa.gov">www.ssa.gov</a> .
	City or town, state, and ZIP code		
	(c) <input type="checkbox"/> <b>Single</b> or <b>Married filing separately</b> <input type="checkbox"/> <b>Married filing jointly</b> or <b>Qualifying widow(er)</b> <input type="checkbox"/> <b>Head of household</b> (Check only if you're unmarried and pay more than half the costs of keeping up a home for yourself and a qualifying individual.)		

**Complete Steps 2–4 ONLY if they apply to you; otherwise, skip to Step 5.** See page 2 for more information on each step, who can claim exemption from withholding, when to use the estimator at [www.irs.gov/W4App](http://www.irs.gov/W4App), and privacy.

**Step 2: Multiple Jobs or Spouse Works**

Complete this step if you (1) hold more than one job at a time, or (2) are married filing jointly and your spouse also works. The correct amount of withholding depends on income earned from all of these jobs.

Do **only one** of the following.

(a) Use the estimator at [www.irs.gov/W4App](http://www.irs.gov/W4App) for most accurate withholding for this step (and Steps 3–4); **or**

(b) Use the Multiple Jobs Worksheet on page 3 and enter the result in Step 4(c) below for roughly accurate withholding; **or**

(c) If there are only two jobs total, you may check this box. Do the same on Form W-4 for the other job. This option is accurate for jobs with similar pay; otherwise, more tax than necessary may be withheld . . . ▶

**TIP:** To be accurate, submit a 2022 Form W-4 for all other jobs. If you (or your spouse) have self-employment income, including as an independent contractor, use the estimator.

**Complete Steps 3–4(b) on Form W-4 for only ONE of these jobs.** Leave those steps blank for the other jobs. (Your withholding will be most accurate if you complete Steps 3–4(b) on the Form W-4 for the highest paying job.)

<b>Step 3:</b> <b>Claim Dependents</b>	If your total income will be \$200,000 or less (\$400,000 or less if married filing jointly): Multiply the number of qualifying children under age 17 by \$2,000 ▶ \$ _____		
	Multiply the number of other dependents by \$500 . . . . ▶ \$ _____		
	Add the amounts above and enter the total here . . . . .	<b>3</b>	\$
<b>Step 4 (optional): Other Adjustments</b>	(a) <b>Other income (not from jobs).</b> If you want tax withheld for other income you expect this year that won't have withholding, enter the amount of other income here. This may include interest, dividends, and retirement income . . . . .	<b>4(a)</b>	\$
	(b) <b>Deductions.</b> If you expect to claim deductions other than the standard deduction and want to reduce your withholding, use the Deductions Worksheet on page 3 and enter the result here . . . . .	<b>4(b)</b>	\$
	(c) <b>Extra withholding.</b> Enter any additional tax you want withheld each <b>pay period</b> . . . . .	<b>4(c)</b>	\$

**Step 5: Sign Here**

Under penalties of perjury, I declare that this certificate, to the best of my knowledge and belief, is true, correct, and complete.

▶ **Employee's signature** (This form is not valid unless you sign it.)

▶ **Date**

<b>Employers Only</b>	Employer's name and address	First date of employment	Employer identification number (EIN)





**Employment Eligibility Verification**  
**Department of Homeland Security**  
 U.S. Citizenship and Immigration Services

**USCIS**  
**Form I-9**  
 OMB No. 1615-0047  
 Expires 10/31/2022

▶ **START HERE: Read instructions carefully before completing this form. The instructions must be available, either in paper or electronically, during completion of this form. Employers are liable for errors in the completion of this form.**

**ANTI-DISCRIMINATION NOTICE:** It is illegal to discriminate against work-authorized individuals. Employers **CANNOT** specify which document(s) an employee may present to establish employment authorization and identity. The refusal to hire or continue to employ an individual because the documentation presented has a future expiration date may also constitute illegal discrimination.

**Section 1. Employee Information and Attestation** *(Employees must complete and sign Section 1 of Form I-9 no later than the first day of employment, but not before accepting a job offer.)*

Last Name (Family Name)		First Name (Given Name)		Middle Initial	Other Last Names Used (if any)	
Address (Street Number and Name)			Apt. Number	City or Town		State
Date of Birth (mm/dd/yyyy)		U.S. Social Security Number		Employee's E-mail Address		Employee's Telephone Number
<input type="text"/> <input type="text"/> <input type="text"/> - <input type="text"/> <input type="text"/> <input type="text"/> - <input type="text"/> <input type="text"/> <input type="text"/>						

I am aware that federal law provides for imprisonment and/or fines for false statements or use of false documents in connection with the completion of this form.

I attest, under penalty of perjury, that I am (check one of the following boxes):

<input type="checkbox"/> 1. A citizen of the United States	
<input type="checkbox"/> 2. A noncitizen national of the United States (See instructions)	
<input type="checkbox"/> 3. A lawful permanent resident (Alien Registration Number/USCIS Number): _____	
<input type="checkbox"/> 4. An alien authorized to work until (expiration date, if applicable, mm/dd/yyyy): _____ Some aliens may write "N/A" in the expiration date field. (See instructions)	
Aliens authorized to work must provide only one of the following document numbers to complete Form I-9: An Alien Registration Number/USCIS Number OR Form I-94 Admission Number OR Foreign Passport Number.	
1. Alien Registration Number/USCIS Number: _____ <b>OR</b> 2. Form I-94 Admission Number: _____ <b>OR</b> 3. Foreign Passport Number: _____ Country of Issuance: _____	QR Code - Section 1 Do Not Write In This Space

Signature of Employee	Today's Date (mm/dd/yyyy)
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**Preparer and/or Translator Certification (check one):**  
 I did not use a preparer or translator.     A preparer(s) and/or translator(s) assisted the employee in completing Section 1.  
*(Fields below must be completed and signed when preparers and/or translators assist an employee in completing Section 1.)*

I attest, under penalty of perjury, that I have assisted in the completion of Section 1 of this form and that to the best of my knowledge the information is true and correct.

Signature of Preparer or Translator			Today's Date (mm/dd/yyyy)	
Last Name (Family Name)		First Name (Given Name)		
Address (Street Number and Name)		City or Town	State	ZIP Code

Employer Completes Next Page

## LISTS OF ACCEPTABLE DOCUMENTS

All documents must be **UNEXPIRED**

**A COMBINATION OF THESE DOCUMENTS MUST BE SUBMITTED WITH YOUR NEW-HIRE PACKET**

Employees may present one selection from List A  
or a combination of one selection from List B and one selection from List C.

<b>LIST A</b> <b>Documents that Establish Both Identity and Employment Authorization</b>	<b>OR</b> <b>LIST B</b> <b>Documents that Establish Identity</b>	<b>AND</b> <b>LIST C</b> <b>Documents that Establish Employment Authorization</b>
<ol style="list-style-type: none"> <li>1. U.S. Passport or U.S. Passport Card</li> <li>2. Permanent Resident Card or Alien Registration Receipt Card (Form I-551)</li> <li>3. Foreign passport that contains a temporary I-551 stamp or temporary I-551 printed notation on a machine-readable immigrant visa</li> <li>4. Employment Authorization Document that contains a photograph (Form I-766)</li> <li>5. For a nonimmigrant alien authorized to work for a specific employer because of his or her status:               <ol style="list-style-type: none"> <li>a. Foreign passport; and</li> <li>b. Form I-94 or Form I-94A that has the following:                   <ol style="list-style-type: none"> <li>(1) The same name as the passport; and</li> <li>(2) An endorsement of the alien's nonimmigrant status as long as that period of endorsement has not yet expired and the proposed employment is not in conflict with any restrictions or limitations identified on the form.</li> </ol> </li> </ol> </li> <li>6. Passport from the Federated States of Micronesia (FSM) or the Republic of the Marshall Islands (RMI) with Form I-94 or Form I-94A indicating nonimmigrant admission under the Compact of Free Association Between the United States and the FSM or RMI</li> </ol>	<ol style="list-style-type: none"> <li>1. Driver's license or ID card issued by a State or outlying possession of the United States provided it contains a photograph or information such as name, date of birth, gender, height, eye color, and address</li> <li>2. ID card issued by federal, state or local government agencies or entities, provided it contains a photograph or information such as name, date of birth, gender, height, eye color, and address</li> <li>3. School ID card with a photograph</li> <li>4. Voter's registration card</li> <li>5. U.S. Military card or draft record</li> <li>6. Military dependent's ID card</li> <li>7. U.S. Coast Guard Merchant Mariner Card</li> <li>8. Native American tribal document</li> <li>9. Driver's license issued by a Canadian government authority</li> <li style="text-align: center;"><b>For persons under age 18 who are unable to present a document listed above:</b></li> <li>10. School record or report card</li> <li>11. Clinic, doctor, or hospital record</li> <li>12. Day-care or nursery school record</li> </ol>	<ol style="list-style-type: none"> <li>1. A Social Security Account Number card, unless the card includes one of the following restrictions:               <ol style="list-style-type: none"> <li>(1) NOT VALID FOR EMPLOYMENT</li> <li>(2) VALID FOR WORK ONLY WITH INS AUTHORIZATION</li> <li>(3) VALID FOR WORK ONLY WITH DHS AUTHORIZATION</li> </ol> </li> <li>2. Certification of report of birth issued by the Department of State (Forms DS-1350, FS-545, FS-240)</li> <li>3. Original or certified copy of birth certificate issued by a State, county, municipal authority, or territory of the United States bearing an official seal</li> <li>4. Native American tribal document</li> <li>5. U.S. Citizen ID Card (Form I-197)</li> <li>6. Identification Card for Use of Resident Citizen in the United States (Form I-179)</li> <li>7. Employment authorization document issued by the Department of Homeland Security</li> </ol>