

R·I·T

E. PHILIP

SAUNDERS

COLLEGE OF BUSINESS

Graduate
Student Worker
Handbook

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**AGREEMENT BY RIT STUDENT EMPLOYEE TO MAINTAIN
CONFIDENTIALITY AND PRIVACY OF STUDENT EMPLOYMENT,
REGISTRATION, FINANCIAL AID AND PAYROLL RECORDS**

I, _____ (print name), understand that in my capacity as a student employee at Rochester Institute of Technology, whether as a co-op, part-time, work-study student or otherwise, I may have access to confidential and private records of other students or other confidential information pertaining to the University.

I understand that under federal law and University policy, student records are protected from disclosure to third parties unless pursuant to narrow exceptions and that other confidential records must not be disclosed.

I agree to maintain the confidentiality and privacy of all such records during and after my period(s) of employment at Rochester Institute of Technology. I shall not, directly or indirectly, communicate to any person other than my supervisor, or an individual approved by my supervisor, any information concerning such records. I understand that any such disclosure may be grounds for termination, prohibition of future employment and/or dismissal from Rochester Institute of Technology.

Signature


Date

Please provide a copy to the student and maintain original in the department's file.

New Student Information

New students who wish to work on-campus must first complete the employment eligibility process to receive their Employment Eligibility Card. This process must be completed in person in the Student Employment Office (SEO). The SEO is located in the University Services Center in Room 1350. Office hours are Monday - Friday, 8:30am - 4:30pm.

In order to work on-campus, students must:

- Be registered with full-time status (minimum of 12 credit hours)
- Complete an I-9 Form as mandated by the Federal Government, and provide proof of identity and eligibility to work. **Examples** of acceptable documents are:
 1. Government issued photo identification, such as a driver's license, **with** a Social Security Card OR birth certificate (two documents required with one document being photo identification).
 2. U.S. Passport
 3. Foreign students - F-1 Visa with I-20 or J-1 Visa with DS-2019
- View a listing of additional acceptable documents at  <http://www.rit.edu/seo/docs/i-9documents.pdf> [PDF].

ALL DOCUMENTS MUST BE ORIGINAL AND UNEXPIRED. Photo copies are not accepted.

Once this process has been completed, students will receive their Employment Eligibility Card for the current academic year. Students may then apply for on-campus positions. All on-campus jobs are listed on the Student Employment Office's website, <http://www.rit.edu/seo>. Just select the job(s) you wish to apply for and contact the employer via email or phone. All contact information regarding the job will be found with the job listing.

Questions can be directed to the Student Employment Office by email at 967dept@rit.edu, or by phone at 585-475-2631.

Instructions

Read all instructions carefully before completing this form.

Anti-Discrimination Notice. It is illegal to discriminate against any individual (other than an alien not authorized to work in the United States) in hiring, discharging, or recruiting or referring for a fee because of that individual's national origin or citizenship status. It is illegal to discriminate against work-authorized individuals. Employers **CANNOT** specify which document(s) they will accept from an employee. The refusal to hire an individual because the documents presented have a future expiration date may also constitute illegal discrimination. For more information, call the Office of Special Counsel for Immigration Related Unfair Employment Practices at 1-800-255-8155.

What Is the Purpose of This Form?

The purpose of this form is to document that each new employee (both citizen and noncitizen) hired after November 6, 1986, is authorized to work in the United States.

When Should Form I-9 Be Used?

All employees, citizens, and noncitizens hired after November 6, 1986, and working in the United States must complete Form I-9.

Filling Out Form I-9

Section 1, Employee

This part of the form must be completed no later than the time of hire, which is the actual beginning of employment. Providing the Social Security Number is voluntary, except for employees hired by employers participating in the USCIS Electronic Employment Eligibility Verification Program (E-Verify). **The employer is responsible for ensuring that Section 1 is timely and properly completed.**

Noncitizen Nationals of the United States

Noncitizen nationals of the United States are persons born in American Samoa, certain former citizens of the former Trust Territory of the Pacific Islands, and certain children of noncitizen nationals born abroad.

Employers should note the work authorization expiration date (if any) shown in **Section 1**. For employees who indicate an employment authorization expiration date in **Section 1**, employers are required to reverify employment authorization for employment on or before the date shown. Note that some employees may leave the expiration date blank if they are aliens whose work authorization does not expire (e.g., asylees, refugees, certain citizens of the Federated States of Micronesia or the Republic of the Marshall Islands). For such employees, reverification does not apply unless they choose to present

in **Section 2** evidence of employment authorization that contains an expiration date (e.g., Employment Authorization Document (Form I-766)).

Preparer/Translator Certification

The Preparer/Translator Certification must be completed if **Section 1** is prepared by a person other than the employee. A preparer/translator may be used only when the employee is unable to complete **Section 1** on his or her own. However, the employee must still sign **Section 1** personally.

Section 2, Employer

For the purpose of completing this form, the term "employer" means all employers including those recruiters and referrers for a fee who are agricultural associations, agricultural employers, or farm labor contractors. Employers must complete **Section 2** by examining evidence of identity and employment authorization within three business days of the date employment begins. However, if an employer hires an individual for less than three business days, **Section 2** must be completed at the time employment begins. Employers cannot specify which document(s) listed on the last page of Form I-9 employees present to establish identity and employment authorization. Employees may present any List A document **OR** a combination of a List B and a List C document.

If an employee is unable to present a required document (or documents), the employee must present an acceptable receipt in lieu of a document listed on the last page of this form. Receipts showing that a person has applied for an initial grant of employment authorization, or for renewal of employment authorization, are not acceptable. Employees must present receipts within three business days of the date employment begins and must present valid replacement documents within 90 days or other specified time.

Employers must record in Section 2:

1. Document title;
2. Issuing authority;
3. Document number;
4. Expiration date, if any; and
5. The date employment begins.

Employers must sign and date the certification in **Section 2**. Employees must present original documents. Employers may, but are not required to, photocopy the document(s) presented. If photocopies are made, they must be made for all new hires. Photocopies may only be used for the verification process and must be retained with Form I-9. **Employers are still responsible for completing and retaining Form I-9.**

For more detailed information, you may refer to the *USCIS Handbook for Employers (Form M-274)*. You may obtain the handbook using the contact information found under the header "USCIS Forms and Information."

Section 3, Updating and Reverification

Employers must complete **Section 3** when updating and/or reverifying Form I-9. Employers must reverifiy employment authorization of their employees on or before the work authorization expiration date recorded in **Section 1** (if any). Employers **CANNOT** specify which document(s) they will accept from an employee.

- A. If an employee's name has changed at the time this form is being updated/reverified, complete Block A.
- B. If an employee is rehired within three years of the date this form was originally completed and the employee is still authorized to be employed on the same basis as previously indicated on this form (updating), complete Block B and the signature block.
- C. If an employee is rehired within three years of the date this form was originally completed and the employee's work authorization has expired or if a current employee's work authorization is about to expire (reverification), complete Block B; and:
 - 1. Examine any document that reflects the employee is authorized to work in the United States (see List A or C);
 - 2. Record the document title, document number, and expiration date (if any) in Block C; and
 - 3. Complete the signature block.

Note that for reverification purposes, employers have the option of completing a new Form I-9 instead of completing **Section 3**.

What Is the Filing Fee?

There is no associated filing fee for completing Form I-9. This form is not filed with USCIS or any government agency. Form I-9 must be retained by the employer and made available for inspection by U.S. Government officials as specified in the Privacy Act Notice below.

USCIS Forms and Information

To order USCIS forms, you can download them from our website at www.uscis.gov/forms or call our toll-free number at 1-800-870-3676. You can obtain information about Form I-9 from our website at www.uscis.gov or by calling 1-888-464-4218.

Information about E-Verify, a free and voluntary program that allows participating employers to electronically verify the employment eligibility of their newly hired employees, can be obtained from our website at www.uscis.gov/e-verify or by calling 1-888-464-4218.

General information on immigration laws, regulations, and procedures can be obtained by telephoning our National Customer Service Center at 1-800-375-5283 or visiting our Internet website at www.uscis.gov.

Photocopying and Retaining Form I-9

A blank Form I-9 may be reproduced, provided both sides are copied. The Instructions must be available to all employees completing this form. Employers must retain completed Form I-9s for three years after the date of hire or one year after the date employment ends, whichever is later.

Form I-9 may be signed and retained electronically, as authorized in Department of Homeland Security regulations at 8 CFR 274a.2.

Privacy Act Notice

The authority for collecting this information is the Immigration Reform and Control Act of 1986, Pub. L. 99-603 (8 USC 1324a).

This information is for employers to verify the eligibility of individuals for employment to preclude the unlawful hiring, or recruiting or referring for a fee, of aliens who are not authorized to work in the United States.

This information will be used by employers as a record of their basis for determining eligibility of an employee to work in the United States. The form will be kept by the employer and made available for inspection by authorized officials of the Department of Homeland Security, Department of Labor, and Office of Special Counsel for Immigration-Related Unfair Employment Practices.

Submission of the information required in this form is voluntary. However, an individual may not begin employment unless this form is completed, since employers are subject to civil or criminal penalties if they do not comply with the Immigration Reform and Control Act of 1986.

Paperwork Reduction Act

An agency may not conduct or sponsor an information collection and a person is not required to respond to a collection of information unless it displays a currently valid OMB control number. The public reporting burden for this collection of information is estimated at 12 minutes per response, including the time for reviewing instructions and completing and submitting the form. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to: U.S. Citizenship and Immigration Services, Regulatory Management Division, 111 Massachusetts Avenue, N.W., 3rd Floor, Suite 3008, Washington, DC 20529-2210. OMB No. 1615-0047. **Do not mail your completed Form I-9 to this address.**

Form I-9, Employment Eligibility Verification

Read instructions carefully before completing this form. The instructions must be available during completion of this form.

ANTI-DISCRIMINATION NOTICE: It is illegal to discriminate against work-authorized individuals. Employers CANNOT specify which document(s) they will accept from an employee. The refusal to hire an individual because the documents have a future expiration date may also constitute illegal discrimination.

Section 1. Employee Information and Verification (To be completed and signed by employee at the time employment begins.)

Print Name: Last	First	Middle Initial	Maiden Name
Address (Street Name and Number)		Apt. #	Date of Birth (month/day/year)
City	State	Zip Code	Social Security #

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):

- A citizen of the United States
- A noncitizen national of the United States (see instructions)
- A lawful permanent resident (Alien #) _____
- An alien authorized to work (Alien # or Admission #) _____ until (expiration date, if applicable - month/day/year)

Employee's Signature _____ Date (month/day/year) _____

Preparer and/or Translator Certification (To be completed and signed if Section 1 is prepared by a person other than the employee.) I attest, under penalty of perjury, that I have assisted in the completion of this form and that to the best of my knowledge the information is true and correct.

Preparer's/Translator's Signature _____	Print Name _____
Address (Street Name and Number, City, State, Zip Code) _____	
Date (month/day/year) _____	

Section 2. Employer Review and Verification (To be completed and signed by employer. Examine one document from List A OR examine one document from List B and one from List C, as listed on the reverse of this form, and record the title, number, and expiration date, if any, of the document(s).)

List A	OR	List B	AND	List C
Document title: _____	OR	_____	_____	_____
Issuing authority: _____		_____	_____	_____
Document #: _____		_____	_____	_____
Expiration Date (if any): _____		_____	_____	_____
Document #: _____		_____	_____	_____
Expiration Date (if any): _____	_____	_____	_____	_____

CERTIFICATION: I attest, under penalty of perjury, that I have examined the document(s) presented by the above-named employee, that the above-listed document(s) appear to be genuine and to relate to the employee named, that the employee began employment on (month/day/year) _____ and that to the best of my knowledge the employee is authorized to work in the United States. (State employment agencies may omit the date the employee began employment.)

Signature of Employer or Authorized Representative _____	Print Name _____	Title _____
Business or Organization Name and Address (Street Name and Number, City, State, Zip Code) _____		Date (month/day/year) _____

Section 3. Updating and Reverification (To be completed and signed by employer.)

A. New Name (if applicable) _____	B. Date of Rehire (month/day/year) (if applicable) _____
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C. If employee's previous grant of work authorization has expired, provide the information below for the document that establishes current employment authorization.

Document Title: _____ Document #: _____ Expiration Date (if any): _____

I attest, under penalty of perjury, that to the best of my knowledge, this employee is authorized to work in the United States, and if the employee presented document(s), the document(s) I have examined appear to be genuine and to relate to the individual.

Signature of Employer or Authorized Representative _____	Date (month/day/year) _____
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LISTS OF ACCEPTABLE DOCUMENTS

All documents must be unexpired

LIST A

**Documents that Establish Both
Identity and Employment
Authorization**

LIST B

**Documents that Establish
Identity**

LIST C

**Documents that Establish
Employment Authorization**

OR

AND

1. U.S. Passport or U.S. Passport Card	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	1. Social Security Account Number card other than one that specifies on the face that the issuance of the card does not authorize employment in the United States
2. Permanent Resident Card or Alien Registration Receipt Card (Form I-551)		
3. Foreign passport that contains a temporary I-551 stamp or temporary I-551 printed notation on a machine-readable immigrant visa	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	2. Certification of Birth Abroad issued by the Department of State (Form FS-545)
4. Employment Authorization Document that contains a photograph (Form I-766)	3. School ID card with a photograph	3. Certification of Report of Birth issued by the Department of State (Form DS-1350)
	4. Voter's registration card	
5. In the case of a nonimmigrant alien authorized to work for a specific employer incident to status, a foreign passport with Form I-94 or Form I-94A bearing the same name as the passport and containing an endorsement of the alien's nonimmigrant status, as long as the period of endorsement has not yet expired and the proposed employment is not in conflict with any restrictions or limitations identified on the form	5. U.S. Military card or draft record	4. Original or certified copy of birth certificate issued by a State, county, municipal authority, or territory of the United States bearing an official seal
	6. Military dependent's ID card	
	7. U.S. Coast Guard Merchant Mariner Card	5. Native American tribal document
	8. Native American tribal document	6. U.S. Citizen ID Card (Form I-197)
	9. Driver's license issued by a Canadian government authority	
For persons under age 18 who are unable to present a document listed above:		7. Identification Card for Use of Resident Citizen in the United States (Form I-179)
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	10. School record or report card	8. Employment authorization document issued by the Department of Homeland Security
	11. Clinic, doctor, or hospital record	
	12. Day-care or nursery school record	

Illustrations of many of these documents appear in Part 8 of the Handbook for Employers (M-274)

Recording Time Worked

All employers, including RIT, are mandated by the Fair Labor and Standards Act (FLSA) to pay employees for actual hours worked. Subsequently, employees must only record hours that are actually worked.

Kronos

As part of your employment responsibilities, you are expected to punch in and out each and every time you report for work through one of the Kronos Time Clocks on campus. A list of time clock locations on campus has been provided on the following page.

How to Use the Clocks - Punching In/Out

1. Press the "*" key on the key pad
2. Key in your badge number
3. Press the "Enter" key

Time Sheets

If you forget to clock in or out or you are working on an assignment that requires you to be off campus, you will be required to provide documentation verifying your actual time worked via a time sheet listing your hours. A copy of the time sheet is provided in this packet and may also be found online at <http://finweb.rit.edu/controller/forms/BlankTimeCards.pdf>.

You may email your time sheet to Shirley Wright (sewbbu@rit.edu), Senior Staff Assistant in the Dean's Office. Emails must be sent from your RIT DCE account directly to Shirley, with a cc to your professor/administrative staff member and Peggy Tirrell. Please also indicate what work you were performing and where (for example - company interviews with professor at Xerox, etc.).

If you are emailing your time, please use your RIT email account. We cannot accept hours from other email accounts.

Time cards are due every Thursday at 5pm. If you do not submit your timesheet weekly, you will not be paid in a timely manner.

CALLING ALL STUDENT EMPLOYEES – REGISTER FOR STUDENT SELF SERVICE!!

DO-IT-YOURSELF PAYROLL OPTIONS NOW AVAILABLE!!!

- **Sign up for Direct Deposit****
- **Access your Pay slip****
- **Change your Tax Withholding****
- **Print your W-2****

REGISTRATION is FAST and EASY...!!!

1. Go to <https://myinfo.rit.edu>
2. Enter username: ritstudent
3. Enter password: tiger123
4. Create your own username & password by following the prompts. (You'll need your PAY STUB to access your employee number and the exact spelling of your name in the payroll system.)
5. Go to <https://myinfo.rit.edu> and log in with your new user name and password.
6. Click on the RIT Student Self Service link.
7. Click on the self-service option you need.
8. Follow prompts to set up direct deposit, access your pay slip, update tax withholding, and more!

Need Help? Call F&A Customer Support @ 475-4748
Or visit <http://finweb.rit.edu/controller/payroll.html> for more detailed information.

**Wouldn't it be nice to be able to view your timecard to
ensure you are paid for the correct hours?**

Now you can! Visit the site below and log on with your
RIT Computer account username and password.

<https://finweb.rit.edu/kronos/apps/timecardreview/>



2009/2010 RIT Bi-Weekly Pay Schedule

**2009
BI-WEEKLY PAY SCHEDULE**

**2010
BI-WEEKLY PAY SCHEDULE**

<u>Pay Period</u>	<u>Pay Date</u>	<u>Pay Period</u>	<u>Pay Date</u>
01/02/09 - 01/15/09	01/23/09	01/01/10 - 01/14/10	01/22/10
01/16/09 - 01/29/09	02/06/09	01/15/10 - 01/28/10	02/05/10
01/30/09 - 02/12/09	02/20/09	01/29/10 - 02/11/10	02/19/10
02/13/09 - 02/26/09	03/06/09	02/12/10 - 02/25/10	03/05/10
02/27/09 - 03/12/09	03/20/09	02/26/10 - 03/11/10	03/19/10
03/13/09 - 03/26/09	04/03/09	03/12/10 - 03/25/10	04/02/10
03/27/09 - 04/09/09	04/17/09	03/26/10 - 04/08/10	04/16/10
04/10/09 - 04/23/09	05/01/09	04/09/10 - 04/22/10	04/30/10
04/24/09 - 05/07/09	05/15/09	04/23/10 - 05/06/10	05/14/10
05/08/09 - 05/21/09	05/29/09	05/07/10 - 05/20/10	05/28/10
05/22/09 - 06/04/09	06/12/09	05/21/10 - 06/03/10	06/11/10
06/05/09 - 06/18/09	06/26/09	06/04/10 - 06/17/10	06/25/10
06/19/09 - 07/02/09	07/10/09	06/18/10 - 07/01/10	07/09/10
07/03/09 - 07/16/09	07/24/09	07/02/10 - 07/15/10	07/23/10
07/17/09 - 07/30/09	08/07/09	07/16/10 - 07/29/10	08/06/10
07/31/09 - 08/13/09	08/21/09	07/30/10 - 08/12/10	08/20/10
08/14/09 - 08/27/09	09/04/09	08/13/10 - 08/26/10	09/03/10
08/28/09 - 09/10/09	09/18/09	08/27/10 - 09/09/10	09/17/10
09/11/09 - 09/24/09	10/02/09	09/10/10 - 09/23/10	10/01/10
09/25/09 - 10/08/09	10/16/09	09/24/10 - 10/07/10	10/15/10
10/09/09 - 10/22/09	10/30/09	10/08/10 - 10/21/10	10/29/10
10/23/09 - 11/05/09	11/13/09	10/22/10 - 11/04/10	11/12/10
11/06/09 - 11/19/09	11/27/09	11/05/10 - 11/18/10	11/26/10
11/20/09 - 12/03/09	12/11/09	11/19/10 - 12/02/10	12/10/10
12/04/09 - 12/17/09	12/25/09	12/03/10 - 12/16/10	12/24/10
12/18/09 - 12/31/09	01/08/10	12/17/10 - 12/30/10	01/07/11
Start Date - End Date	Pay Date	Start Date - End Date	Pay Date

R·I·T

Controller

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Find A Clock

Clocks on Campus

Building Name	Building Number	Floor Location	Near Room	Clock Group Name	Clock ID
Alexander Graham Bell Hall	50C	A Level	204	Bell	020465
Baush & Lomb	77	1st Floor	1238	Bausch-1	011238
Booth	7A	1st Floor	1571	Booth-7A-1	191049
Booth	7A	2nd Floor	2549	Booth-7A-2	291051
Campus Connections	15	2nd Floor		Bookstore	291114
Carey	14	1st Floor	1522	Carey-1	011522
CAST	70	1st Floor	Front Entrance	CAST-1	191030
CBET	75	1st Floor	1982	C-BET	001982
CIMS	78	1st Floor	1397	CIMS	011397
Chester Carlson	76	2nd Floor	2116	Carlson-2	291309
Clark Gym	3	Closet	Downstairs	Clark Gymnasium	020843
College of Business	12	1st Floor	1245	COB-1	191019
Crossroads	89	1st Floor	Back of HUB	Crossroads	010001
Dining Commons	55	2nd Floor	Kitchen	Shumway	207559
Ellingson	50A	1st Floor	1058	Ellingson-1	011058
FMS 96	96	1st Floor	In Break Room	Building 96	096000
Gannett	7B	A Level	A911	Gannett-A	911591
Gannett	7B	1st Floor		Gannett-1	195020
Gannett	7B	3rd Floor	3110	Gannett-3	310041
George Eastman	1	1st Floor	1950	Eastman-1	011950
Gosnell	8	1st Floor	1328	Gosnell-1	191023
Gosnell-FMS	8	A Level	In room A212	Gosnell-A	080212
Grace Watson Hall	25	1st Floor	1950	GWH-1	195031
Grace Watson Hall	25	2nd Floor	2911	GWH-2	291132
Housing 113	113	1st Floor		Housing 113	000113
Housing 600	600	Garage		Housing 600	000600

James Gleason	9	1st Floor	Entrance	Gleason	091042
James Gleason	9	2nd Floor	2410	Gleason Front	092410
Kate Gleason Hall	35	A Level	23	Gleason2	023333
Kate Gleason Hall	35	1st Floor	1040	KGH-1	011040
LBJ	60	1st Floor	1741	LBJ	192231
LBJ	60	2nd Floor	2860	LBJ-2	022860
Liberal Arts	6	1st Floor	SW Entrance	LA-1	190913
Margaret's House	50C	Lobby	1280	Margarets House	011280
Micro-Electronics	17	2nd Floor	2560	MicroElect-2	022560
Nathaniel Rochester Hall	43	A Level	Manager Office	Cornerstore	077516
Nathaniel Rochester Hall	43	1st Floor	1913	NRH-1	191319
NTID-Student Dev. Center	55	1st Floor	1082	NTID SDC-1	001082
Physical Plant	99	Main	Right Door Ent.	99	910243
Ross	10	A Level	A400	ITS Tech Support	367215
SAU	4	A Level	A948	Union-A	269259
SAU	4	1st Floor	1930	Union-1	134719
Sol Heumann	47	1st Floor	1016	Sol Heumann	011016
Student Life Center	23	A Level	A240	Student Life Center-2	024007
Student Life Center	23	1st Floor	1400	SLC	140012
Wallace Library	5	A Level	A635	Library-A	915620
Wallace Library	5	1st Floor	1630	Library-1	173042

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2009-2010 Academic Year Graduate Student Worker Application

Name: _____ UID: _____
(last name) (first name)

E-Mail: _____ Local phone # _____

Local address: _____

Program of Study: MBA ____ MS Finance ____ MS Management ____ MS Innovation Management ____

If MBA, Concentration Area(s) : _____

Check Quarters You Will Be Enrolled Full-time ____091 ____092 ____093 ____094



Skills: Check ALL that apply

- Data entry and/or coding
- Data verification
- Data collection from primary sources and organizing into structured database
- Data analysis
- Data/statistical analysis - basic
- Data/statistical analysis - including regression
- Library and database research
- Literature review
- Read and synthesize information from articles
- Conduct telephone and/or in person interviews
- Code data from Chinese surveys
- SPSS /SAS
- Excel
- Web development
- NVIVO experience
- Transcription skills – Dragon dictate a plus
- Strong understanding of financial statements
- Experience with online surveys
- Experience with grant development/proposals

- Attention to detail
- Ability to meet deadlines
- Strong communications skills: verbal _____ written _____
- Strong organizational skills
- Fluent in Chinese
- Fluent in Albanian
- Other:
- Other:
- Other:

Please return this information to Student Services

Graduate Student Worker (GSW) Policies, Rules and Responsibilities

Please read over the following information and sign below to indicate that you have read the information and agree to adhere to the policies, rules and responsibilities.

General

1. GSWs must contact the faculty or administrative staff member to which they have been assigned within two days of being notified of their assignment to discuss schedule and work.
2. GSW positions are offered based on the qualifications of the applicant matching with the needs of our faculty and administrative staff.
3. GSWs must contact the faculty or administrative staff member to which they have been assigned within two days of being notified of their assignment to discuss schedule and work.
4. GSW positions are granted only to graduate students with outstanding academic records. Therefore, the nature of tasks assigned to a GSW should be commensurate with his or her background and degree program. If a GSW feels that this is not happening, it is his or her responsibility to discuss the nature of the work assigned with their faculty or administrative staff member. The student must also notify the Sr. Associate Director.

Eligibility

5. GSWs are required to maintain a 3.0 GPA throughout their program.
6. Students on co-op assignments are not eligible for a GSW position.
7. GSW positions are awarded for a maximum number of quarters based on the program of study as indicated below:

MBA	Six academic quarters
MBA – Accounting	Seven academic quarters
MS programs	Four academic quarters

Position Details

8. GSWs are typically required to work 8 hours per week. GSWs may be required to support more than one individual depending on the number of faculty and administrators requiring assistance.
9. GSWs must be available to complete their weekly work assignment within the Saunders College of Business' standard working hours:

Monday – Thursday	8:00am – 6:00pm
Friday	8:00am – 4:30pm

When necessary, however, work may be performed between the hours of 8am-10pm. GSWs cannot work between 10:01pm – 7:59am and are not expected to work on weekends. GSWs may not work on National Holidays.

Time Keeping

10. GSWs are required to use the KRONOS time clock system to record time. Please refer to the document "Recording Time Worked" for more information.
11. GSWs are expected to work for the full 11 week quarter.

Expectations

12. GSWs may be exposed to a large volume of confidential information from many sources (written, verbal and computer generated). The student is required to maintain the confidentiality of any information to which they may be exposed. Failure to maintain confidentiality will mean immediate loss of the GSW position and scholarship if applicable. A signed Confidentiality Statement is required.
13. If the work load assigned to a GSW is consistently more or less than the number of hours required of the GSW, it is the responsibility of the GSW to discuss the matter with his or her faculty or administrative staff member to reach resolution. The student must also notify Peggy Tirrell, Sr. Associate Director for Graduate Business Programs.
14. A GSW will be terminated if one or more of the following occurs:
 - The GSW breaches confidentiality
 - The GSW fails to work the number of hours required for his/her level of award
 - The GSW fails to accurately record their hours worked
 - The GSW fails to punch in or out for a work session **more than one time**
 - The GSW shares their badge number with another student and/or has another student punch in/out on Kronos for them
 - The GSW fails to perform the quality of work expected
 - The GSW fails to maintain a GPA of 3.0 in their program
 - The GSW is found to have engaged in academic dishonesty
 - The GSW fails to make normal academic progress towards completion of their degree program
 - The GSW is unable to schedule their work assignment during normal SCB work hours

I have read and agree to abide by the above stated policies and information. I understand that failure to comply with the above stated information could at any time result in a dismissal and loss of graduate scholarship awards if applicable.

Name Printed _____ University ID# _____

Signature _____ Date _____