| Print / Complete / Sign / Send to HRS (Waterman 228) or Scan & Send via uvm.edu/filetransfer to HRSinfo@uvm.edu EMPLOYEE INFORMATION - To Be Completed by the Employee | | | | |
|---|---------------------|---------------------------------------|------------------------------|--|
| ENIFLUIEE INFUR | WIATION - 10 De Com | pieted by the Employee | | |
| PeopleSoft ID# (7 digits) | | DATE OF BIRTH | | |
| FIRST NAME | | LAST NAME, MI | | |
| SEX | □ Female □ Male | SSN | | |
| PERMANENT MAILING ADDRESS (This is where your W-2 will be mailed) | | ON CAMPUS ADDRESS | ON CAMPUS ADDRESS | |
| STREET | | BUILDING NAME | BUILDING NAME | |
| CITY, STATE, ZIP DEPT. NAME, ROOM NUMBER I CERTIFY THAT THE INFORMATION PROVIDED IN THE EMPLOYEE INFORMATION SECTION IS TRUE AND ACCURATE. | | | | |
| EMPLOYEE SIGNATURE | | D | DATE | |
| UVM STUDENT STATUS | | | | |
| 🗆 Not Enrolled 🗆 Undergrad Student 🗆 Graduate Student | | | | |
| POSITION INFORMATION – To be Completed by the Department Representative | | | | |
| | | CRN GUIDELINES for additional details | | |
| START DATE | END DATE | |)EPT # | |
| □ NON-EMPLOYEE VOLUNTEER – JOB CODE 1006 | | | | |
| Would the University otherwise have to hire an employee to perform these duties? | | | \Box Yes \Box No | |
| Is this an approved volunteer position (Coach, TREK, etc.)? Is the individual receiving a nominal stipend, which results in a payment less than state | | | Tate \Box Yes \Box No | |
| minimum wage? Typically, less than \$1000 per semester. | | | \Box Yes \Box No | |
| □ NON-EMPLOYEE STUDENT LEADER – JOB CODE 1001 | | | | |
| Does this position require the individual to be enrolled as an undergraduate or graduate student at UVM? | | | luate 🛛 Yes 🗆 No | |
| □ NON-EMPLOYEE INTERN – JOB CODE 1005 | | | | |
| Does this position primarily benefit the intern? | | | | |
| Is the individual enrolled as a student? | | | \Box Yes \Box No | |
| Is there an internship agreement on file? | | | \Box Tes \Box No | |
| REQUIRED ATTACHMENTS: | | | | |
| □ I-9 Attached or □ I-9 on File* □ W-4 □Signed Letter/Agreement □ Additional Pay Form will be submitted for payment | | | | |
| *All employees that have had a "break in service" since last employed MUST complete a new I-9 form. | | | | |
| Indicate working title desired for UVM directory: If no working title included the director will indicate the system title associated with the job code. | | | | |
| Brief Description of Duties/Comments: (REQUIRED) | | | | |
| | | | | |
| Supervisor's Signature | Sup | ervisor's Name (Printed) | Supervisor's Employee ID# | |
| Department | Sup | ervisor's e-Mail | Date Submitted | |