



# Student Employee Information

<b>Personal Information</b>				<b>(PPAIDEN)</b>
Name/ First                      Middle                      Last			Name on current Social Security Card	
SSN		Birth date		Gender <input type="checkbox"/> Male  <input type="checkbox"/> Female
Veteran Status: <input type="checkbox"/> Disabled <input type="checkbox"/> Vietnam <input type="checkbox"/> Other:				
Ethnicity: <input type="checkbox"/> White (1) <input type="checkbox"/> Asian/ Pacific Islander (4) <input type="checkbox"/> African American/Black (2) <input type="checkbox"/> American Indian/Native Alaska (5) <input type="checkbox"/> Hispanic (3) <input type="checkbox"/> Other (6):			Citizenship <input type="checkbox"/> U.S. Citizen (C) <input type="checkbox"/> Non-resident Alien (N) <input type="checkbox"/> Resident Alien (R) <input type="checkbox"/> Substantial Presence Test Alien (S) Citizenship Country if Other than USA:	
Local Mailing Address		City		State
Permanent Address (for mailing of W-2 form)		City		State
		Resident of Multnomah County <input type="checkbox"/>		Zip
Local Phone (   )		Work Phone (   )		I am an <input type="checkbox"/> undergraduate/ <input type="checkbox"/> graduate student enrolled in _____ credit hours
<b>Emergency Contact Information</b> List information below regarding person whom you wish to be notified in event of an injury or illness.				
Contact 1 - Name		Relationship to employee		Phone (   )
Street		City		State
				Zip
Contact 2 - Name		Relationship to employee		Phone (   )
Street		City		State
				Zip
<b>Employment Information</b>				
Name of hiring supervisor/Dept.:				
Have you been employed by EOU or Oregon University System in the past: <input type="checkbox"/> No <input type="checkbox"/> Yes   If yes for which University and under what name?				
<b>Payroll Information</b>				<b>(PEAEMPL)</b>
How do you wish your paycheck to be delivered:				
<input type="checkbox"/> <b>Direct Deposit</b> into checking or savings account (attach form or voided check) <input type="checkbox"/> <b>Mail</b> – Please note lost checks will not be replaced until 7 working days after payday. <input type="checkbox"/> <b>Pick up check</b> at payroll office on payday (last working day of the month) (G432000)				
<b><u>AUTHORIZATION</u></b>				
With a few exceptions, your home address and phone number are no longer considered public records. As a result, EOU will only release home addresses and phone numbers of employees who authorize release. If you wish to authorize release of your home address and phone number, please sign below. Unless we have a signed copy of this authorization, we will not release your home address and phone number.				
Signature			Date	
				RESTRICTED <input type="checkbox"/>
<b>International Students Only</b>				<b>(PPAINTL/PEAMPL)</b>
I-94 Status:		Expiration Date:		Alien Registration No.:
Visa No.:		Issue Date:		Expiration Date:
Passport No.:		Expiration Date:		Issuing Country:

**For office use only**

**Student Employee Setup**

**PEAEMPL**

Employee Class: XA Job begin date: \_\_\_\_\_ Home Org: G-\_\_\_\_\_ I-9 Date: \_\_\_\_\_

**NBAJOBS**

Position #: G00401 Index: \_\_\_\_\_ Acct.  10501 Hourly pay \$ \_\_\_\_\_ Job Location 31E or \_\_\_\_\_  
 10503

**GXADIRD**

Bank Name: \_\_\_\_\_ Bank # \_\_\_\_\_ Acct. # \_\_\_\_\_ Checking  
Savings

**PWAOEMP:** Status =01

Deductions – (PDABDSU)	BDCA	Plan Code	Office
Federal tax.	TFE	M S *Exemptions _____ Addl. W/H \$ _____	If filing S/0 or M/0 & exempt status = Waived
Medicare	TME	<input type="checkbox"/> Active <input type="checkbox"/> Exempt	
SAIF	TSF	No plan	
Social Security	TSS	<input type="checkbox"/> Active <input type="checkbox"/> Exempt	
State Tax.	TST	M S *Exemptions _____ Addl. W/H \$ _____	If filing S/0 or M/0 & exempt status = Waived
Mass Transit	TT1	N	
Workers Comp.	TWC	No plan	

**\*Students that claim exempt on W-4 forms must be input as waived or salary will not be included on W-2. Use exempt only on International students.**

**Undergraduate students:** 6 or more credit hours = FICA exempt  
 5 or fewer credit hours = FICA subject

**Graduate students:** 5 or more credit hours = FICA exempt  
 4 or fewer credit hours = FICA subject

**International students:** always FICA exempt.

International Student Setup Deductions – (PDABDSU)	BDCA	Status:	Country/Exemption	Start Date	Office
Fed NRA-Dep Per. Svcs	T17	A or E			Canada only
State NRA-Dep. Per Svcs	T7S	A or E			Canada only
Fed NRA – Allowances/Training	T19	A or E			
State NRA – Allowances/Training	T9S	A or E			