*This form is for hiring only – once employed, personnel changes should be submitted via Manager Self Service (MSS)



Student Employment Hiring Form (SEHF)

Please complete all required fields (*). If you do not know the applicable "Empl ID" or "Position #", you may find it by performing a search at the following link: <u>Position Inquiry Report</u>

| *Student Name: | <u></u> | | | | |
|---|-----------------------------------|---|----------|----|-------------------|
| *Student Email:* *KSU NetID:* KSU ID #: | | *Student Phone Number: Handshake #: Position #: | | | |
| | | | | | *Home Department: |
| *Employee Type: | | *Mail Drop: | | | |
| *Requested Effective Date: (Effective Date will be determined by HR based on paperwork completion as | *Loo nd <u>payroll dates</u>) | *Location: s) | | | |
| Section | A. Position Infor | mation | | | |
| *Reports To Name: | *Re | ports To Position # (from One | USG): | | |
| *Time Approver Name: | *Tiı | ne Approver Empl ID# (from C | OneUSG): | | |
| *Pay Rate: Hourly (for s | SA, FWS, SALT) | Monthly Stipend (for Start Date: | | | |
| *Background Checks Needed: None Criminal Job Code: | CreditN | MVR (If position has access to children, is a position of trust, or requires after-hours access, pre-employment screening is required.) | | | |
| *Will the student assistant drive a KSU vehicle (incluas a part of their regularly assigned job duties? | ding golf cart | s) for university business | s YES | NO | |
| *Will the student assistant be using power tools for regularly assigned job duties? | university bu | siness as a part of their | YES | NO | |
| *Use this space to provide a brief description of work to be | performed: | | | | |
| Sectio | n B. Position Fur | nding | | | |
| *Select Funding Type: | | Combo Code | % of Pay | | |
| If "Split Funded" or "Other Funded" is selected, please list applicable Combo Codes and the corresponding value for percent of pay. | _ | | | | |
| Se | ction C. Approva | ls | | | |
| *Hiring Manager: | Signature: | | Date: | | |
| *Dept. Manager: | — — Signature: | | Date: | | |
| Business Manager: | Signature: | | Date: | | |
| FWS/Grants(if applicable): | Signature: | | Date: | | |

For **Student Assistant**, send completed form to hrstudentemployment@kennesaw.edu.

For **Federal Work Study**, send completed form to fws@kennesaw.edu.

For **GRA/GTA/GPA**, send completed form to gradassistantships@kennesaw.edu