## THE UNIVERSITY OF NORTH CAROLINA AT PEMBROKE

## STUDENT ASSIGNMENT AGREEMENT

POLICY: Use this form for a student temporary employee. For additional information see: Student Employment Policy HR 08 09

<u>\$7</u>	TUDENT INFORMATIO	<u>N</u>							
FIRST N	NAME	M.I.	LAST NAMI	E		BANNER ID		EMAIL	
(Print na	ame as listed on Social Securit	y card) <u>Ad</u>	ddress/Name	change form					
Are you: Currently employed with other state agency?			□ NO	YES	Give agency na	ame			
Currently receiving N. C. State Retirement Benefits?				☐ NO	YES				
Anyone receiving NC State Retirement Benefits must submit a completed <u>Certifying Employee Status Under Retirement Reemployment Laws Form</u> to the Office of Human Resources, 357 Lumbee Hall.									
Oth	erwise employed at UNC	Pembro	oke?	☐ NO	YES	List all othe	er positions (prov	vide Department	and Supervisor name):
TYPE OF EMPLOYMENT FOR THIS AGREEMENT (CHECK ONE)									
UNDERGRADUATE: STUDENT ASSISTANT WORK STUDY STUDENT HAWK-ASSISTANT									
	DESCRIPTION:								
POSITION INFORMATION AND REMUNERATION (Supervisor completes this portion)									
	FLAT RATE STUDENT	ASSIST	ANT WO	ORKING TITI	-E:				POSN#:
	TOTAL AMOUNT O	F ASSIG	NMENT\$		ESTIM	ATED WOR	K HOURS PER W	VEEK	
	HOURLY STUDENT AS	SISTANT	T WC	ORKING TITI	_E:				POSN#:
HOURLY RATE OF PAY \$ MAXIMUM TOTAL HOURS TO BE WORKED (TBD by Financial Manager)									
AGREEMENT PERIOD BEGIN DATE						AN	D ANTICIPATED	END DATE	

STUDENT AGREEMENT: I agree to accept student temporary employment at UNC Pembroke on the following terms:

- Prior to reporting to work I must complete and submit a W-4 (<u>W-4 Tax Withholding Certificate</u>) and NC-4 (<u>NC-4 Withholding Certificate</u>) or (<u>NC-4 EZ Withholding Certificate</u>) tax forms, a complete Section 1 of the I-9 Employment Eligibility Verification (<u>I-9 Employment Verification</u>) form, if required. Some positions may require a <u>Criminal Background Check</u>. If a Criminal Background Check is required, the student will not be allowed to start work until it is completed.
- Per Office of the State Controller and UNCP Policy, I understand that it is a Condition of my Employment for me to be enrolled in Direct Deposit within 30 days of hire or rehire. Failure to provide a completed <u>Direct Deposit</u> form with accompanying documentation to the Payroll Office for Direct Deposit may result in a delay in my pay and/or termination of my employment.
- 3. I will report to the reporting supervisor stated on this Student Assignment Agreement form.
- 4. If my position is paid hourly,
  - I must enter my work hours in Braveweb and electronically submit my timesheet no later than noon the Monday following the bi-weekly work period (which ends on Sunday) in order to be included in the next bi-weekly payroll date.
  - -My supervisor must verify the time worked and my supervisor must approve the Braveweb self-service timesheet by no later than close of business on Monday following the end of a bi-weekly work period in order to be included in the next bi-weekly payroll.
  - •Bi-weekly Timesheets (<u>paper form</u>) will be used to submit work hours late due to missed time entry in a pay period. These timesheets will be processed in the next bi-weekly pay date (<u>see bi-weekly payroll calendar</u>) after receipt in the Payroll Department.
  - •The maximum total hours during the agreement period by the hourly rate equals the total agreement amount I may expect to earn if all hours are worked. I agree to follow the schedule provided to me by my supervisor to ensure that I do not exceed the maximum total hours. Any hours worked in excess of hours scheduled shall be approved by the supervisor. I understand that my failure to obtain this approval can be grounds for discipline and in serious cases, dismissal
- 5. I am required to give regular, punctual, efficient, and cooperative performance on my job assignment.
- 3. I am required to notify my supervisor in advance if illness or unforeseen circumstances prevent my attendance at work.
- 7. I agree to notify my supervisor when I accept additional student employment positions at the university.
- 8. I will conduct myself in a professional manner in the workplace. Undergraduate students who violate the UNCP code of conduct will be referred to the Director of Student Conduct, or designee.

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I understand that acceptance of the position does not qualify me for unemployment compensation at a later date. 10. I understand the continuation of this position is subject to the availability of the appropriate budget in the fund supporting this position. I verify that the student information above is accurate, that I understand the position and remuneration. Further, my signature below indicates that I UNDERSTAND and will COMPLY with the regulations listed above. If I fail to comply, the agreement may be ended prior to the Anticipated End Date stated on this form. Date Student Employee Signature -STUDENT INFORMATION FIRST NAME BANNER ID **EMAIL** REPORTING SUPERVISOR AGREEMENT I understand the Student Assignment Agreement is to be completed by providing information in all data fields. Any data errors should be lined through once and initialed without using white out to revise original data. I agree to notify Human Resources in writing if my student assistant informs me he/she begins working on another assignment agreement during the course of this agreement. I understand as the Employer Representative, for new student employees I must verify Section 1 and complete Section 2 - Employer Review and Verification of the I-9 Employment Eligibility Verification form, if required. I must then complete the E-Verify Department of Homeland Security online employment verification process on the first day the student begins the work assignment, if required. I will contact the Controller's Office before hiring a Non-Resident Alien (non-U.S. citizen) to verify eligibility for employment through the State of North Carolina. I agree to provide a copy of the Handshake job posting. I understand that it is my responsibility to monitor and supervise students by making an effort to assist student assistants in solving any work assignment problems, reviewing and approving Braveweb timesheets by no later than the end of the business day on the Monday following the end of the bi-weekly pay period end date for students paid by the hour. I acknowledge I am the primary person responsible to ensure timely payment to a student assistant. Date Supervisor Approval (print) Signature Title Ext. Supervisor Banner ID AUTHORIZATION (Must be approved by Financial Manager before work begins.) BANNER FUND/ORG and ACCT: # (ex. 170910-21350): **DEPT NAME:** Title Signature

Financial Manager of the above account (from which student will be paid).

## AGREEMENT SUBMISSION

Submit completed original agreement, and a copy of the Handshake job posting as follows:

- Financial Aid for all Work Study Students and Hawk Assistants
- Human Resources for all Student Assistants

Student will be processed and paid according to the appropriate Payroll Calendar. Go to "Bi-weekly" or "Monthly" for dates. Note: Be sure you are on the correct tab at the bottom of the screen for the information you want.

NOTE: Incomplete or inaccurate paperwork will delay the student access to Braveweb Employee Self-Service for Web Time Entry and Bi-Weekly Payroll processing for payment. Accurate paperwork is essential.

## **Additional Resources:**

Student/Temp Web Time Entry Instructions (Word)
Timesheet to Report Late Hours
Bi-Weekly Web Time Entry Correction Form