



# GEORGETOWN UNIVERSITY OFF CAMPUS STUDENT EMPLOYMENT FORM

- Georgetown University • Student Employment Office •
- Room 304 Car Barn, 3520 Prospect Street, NW • Washington, DC 20057 •
- Phone: 202.687.4187 • Fax: 202.784.4877 • [finseo@georgetown.edu](mailto:finseo@georgetown.edu)

**Please submit completed form to the Georgetown University Student Employment Office for processing.**

Today's Date: \_\_\_\_\_ Requested Effective Date of Action: \_\_\_\_\_

Off-Campus Organization Name: \_\_\_\_\_

**ACTION: Please choose one:**       New Hire       Rehire       Compensation Change

### **STUDENT EMPLOYEE NAME AND ID**

First Name: \_\_\_\_\_ Middle Name: \_\_\_\_\_

Last Name: \_\_\_\_\_

**REQUIRED:** Student's Georgetown ID Number (GUID): \_\_\_\_\_

### **IMPORTANT STUDENT HIRE STATUS QUESTIONS**

Enrollment Status:     Undergraduate     Graduate Student     Medical Student     Law Student

Employment Status:    ● Does the student have another job at Georgetown University?     No     Yes  
If yes, Georgetown Department/Contact: \_\_\_\_\_

● Has the student ever worked for Georgetown University before?     No     Yes  
If yes, department and date of last employment: \_\_\_\_\_

● Does the student have a Federal Work Study award?     No     Yes  
If yes, current Federal Work-Study award amounts:  
Fall term: \$\_\_\_\_\_    Spring term: \$\_\_\_\_\_    Summer term: \$\_\_\_\_\_

### **STUDENT'S CONTACT INFORMATION** *Local phone numbers, local home address, and email address is required.*

**PHONES:** Mobile \_\_\_\_\_ Home: \_\_\_\_\_

**LOCAL ADDRESS:**                      Address Effective Date: \_\_\_\_\_

Address Line 1: \_\_\_\_\_

Address Line 2: \_\_\_\_\_ *Include GU Box # for an on-campus address.*

City: \_\_\_\_\_ State: \_\_\_\_\_ Postal Code: \_\_\_\_\_

**EMAIL ADDRESS:** \_\_\_\_\_

**HIRING INFORMATION**

**Hire/Start Date:** \_\_\_\_\_ *IMPORTANT NOTE: the hire date starts the clock for the required I-9 employment eligibility verification. The verification must be completed (and the I-9 form signed by the employer) with a date that is within three days of the hire/start date. The I-9 employment eligibility verification form must be completed by the employer and delivered to the Georgetown Student Employment Office with this hire form.*

**Position Title:** \_\_\_\_\_

**Position Description:** (attach separate sheet if necessary)  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Anticipated Average Weekly Hours:** \_\_\_\_\_ **Hourly Wage:** \$ \_\_\_\_\_

**EMPLOYER CONTACT INFORMATION**

**Supervisor Name:** \_\_\_\_\_ **Phone:** \_\_\_\_\_  
**Email address:** \_\_\_\_\_  
**Secondary Contact:** \_\_\_\_\_ **Phone:** \_\_\_\_\_  
**Email address:** \_\_\_\_\_

*Supervisor: By signing this form below, I am confirming that we have offered employment to this student and agree to promptly pay the employer share of the student's wages as invoiced by Georgetown University.*

\_\_\_\_\_  
*Supervisor's Signature/Date*

**REMINDER: LAST DAY OF WORK for the 2011-12 academic year is MAY 13, 2012**

**FOR GEORGETOWN STUDENT EMPLOYMENT OFFICE USAGE ONLY**

Student's GMS Job Profile: \_\_\_\_\_

Student's Earnings to be charged to the following cost centers:

Cost Center: \_\_RX-2900-\_\_\_\_\_ ( \_\_\_\_\_ 60 \_\_\_\_\_ %)

Cost Center: \_\_GX-2965\_\_\_\_\_ ( \_\_\_\_\_ 40 \_\_\_\_\_ %)

GMS Grade Profile: \_\_ST.01 (Novice) \_\_ST.02 (Semi-Skilled) \_\_ST.03 (Skilled) \_\_ST.04 (Highly Skilled)

*Revised 2/2/12*