

STUDENT EMPLOYMENT CONTRACT – Campus Dining – 2023-2024

Please return to the Human Resources Office in lower level of Zwemer Hall

Student: _____ **Department:** _____

ID Number: _____ **Supervisor:** _____

Student Initials

I have notified my supervisor(s) of my other job(s) on campus.

I agree to work no more than 20 hours/week between all my jobs on campus.

PLEASE NOTE THE FOLLOWING PROVISIONS:

- 1. I have completed I-9 and W-4 forms that are required in order to work on campus. I understand I may not work on campus until these forms are completed and turned in to the Human Resources Office.
- 2. I understand I am required to log my hours accurately. I understand it is my responsibility to have all of my hours logged by the end of the month and that finalizing my hours signifies that I have reviewed and approve my hours. I understand payroll will be directly deposited into my checking or saving’s account on or around the 10th of the month.
- 3. I understand I am accountable to my supervisor for my performance and dependability. I understand, as my employer, my supervisor has the right to dismiss me any time I do not work up to the expectations. I understand that in the event I decide to end my employment, I should give my supervisor at least a 1 week notice before quitting.
- 4. It is my responsibility to work out a schedule of working hours with my supervisor. It is my responsibility to communicate potential conflicts with a work schedule to my supervisor. **I understand that I am not permitted to work during my scheduled class times, even if the class is cancelled.**
- 5. I understand that as a student employee, I am a student first. I understand that if I have two contracted jobs on campus, I must maintain a GPA of 2.0 or above in order to continue working both jobs. If my GPA drops below 2.0, I understand I may have to terminate one of my job contracts.
- 6. If issued a key, I agree to keep it secure. I will not loan it to others or duplicate it. Also, I agree to return it at the end of the contract.
- 7. By signing this contract, I agree to keep student records and administrative data confidential pursuant to the Family Educational Rights and Privacy Act of 1974 and other federal and state statutes. Additional information available on the Registrar’s page at https://my.nwciowa.edu/ICS/Academic/FERPA_Information.jnz.

I understand and agree to the provisions stated above and accept this job contract.

Student Signature Date

Supervisor Signature Date

Department Chairperson Date

NOTE TO STUDENT EMPLOYEE: THIS CONTRACT SHOULD BE REVIEWED WITH YOUR SUPERVISOR AND SIGNED PRIOR TO YOU BEGINNING WORK. This contract needs to be turned in to the Human Resources Office prior to you starting your job. WITHOUT A SIGNED CONTRACT, THIS EMPLOYMENT ASSIGNMENT WILL NOT BE HELD FOR YOU. (SUPERVISORS—please make a copy for your records and send completed forms to the Human Resources Office).

FOR SUPERVISOR USE ONLY:

Check That FORMS Are Completed:
All forms *must be completed*
before a student starts working.

_____ W-4 Federal Form Completed

_____ W-4 State Form Completed

_____ I-9 Form Completed

_____ Direct Deposit Form Completed

Please complete the following regarding SCHEDULE, HOURS & PAY:

This student will be working:
_____ Full Academic Year
_____ 1st Semester Only
_____ 2nd Semester Only

This student will be working approximately _____ hours per week.

Pay Rate is \$11.00/hour for all campus dining positions. If different (and approved by HR) please note the different pay rate here:
