Revised	7/29/2022
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STUDENT APPOINTMENT FORM



This completed form MUST be received in the Student Payroll Office, Maytum Hall, before a student can be activated on the Student Assistant Payroll. It must be received by the PAPERWORK DEADLINE listed on the Payroll Schedule to enable the student to be paid during the

listed on the Payroll Schedule to enable the student to be paid during the current pay period.

THIS SECTION TO BE COMPLETED BY THE STUDENT

Please PRINT legibly using black or blue ink

Student's Full <u>Legal</u> Name (First, Middle, Last): **Legal Name should match as it appears on Social Security Card	
Chosen Name:	
Social Security Number: Date of Birth:	_//(MM/DD/YY)
Students Local/Campus Address:	
Home Phone Number: Cell Phone:	
E-Mail Address:	
Student's Permanent Home Address: (for W2 mailing)	
Ethnicity: Hispanic? Yes No Sex: I Male I Fen	nale
	e 🗖 Female 🔲 Non-binary
Race: Select all that apply	
American Indian or Alaska NativeNative Hawaiian or Othe AsianWhite Black or African American	er Pacific Islanders
Student Status: Image: Part Time (less than 12 credit hours) Image: Full Time (12 credit hours) If not, where enrolled?	it hours or more)
Have you previously been on Student Assistant or College Work Study Payroll? If "No" student <i>must</i> complete paperwork with Payroll Office before appointment is v	
THIS SECTION TO BE COMPLETED BY SUPER	VISOR
Department Hiring:	
Appointment Effective Date:// Hourly Rate:	
Appointment Duration: (check one) Fall Only Spring Only Fa	ll & Spring 🛛 🗖 Summer
Account Number (with sub-account) to be Charged:	
Supervisor's Name and Phone Number:	
Supervisor's Signature:	
VP Approval (If Required)	FOR OFFICE USE ONLY
**You MUST notify Payroll if your Student Employee	DC DD
stops/no longer works for you	Rec # PR # INT



SECURITY RESPONSIBILITY AND CONFIDENTIALITY AGREEMENT

In accordance with the <u>Public Officers Law §74</u> Code of Ethics, information contained in the various electronic systems and physical files used by State University of New York at Fredonia ("Fredonia") is confidential in nature and is only to be used in connection with official State business following the Fredonia Information Security Program. Access to the electronic or physical information is granted to selected offices with the understanding that the information and any reports generated from various systems will be accessible only to appropriate personnel for legitimate business purposes.

As an employee of Fredonia, I recognize that I may have access to or be required to handle certain information that is confidential, private, and proprietary for the performance of my duties.

I am aware that:

- Data should be accessed and made available only to authorized persons for State business by authorized departmental personnel following approved departmental procedures;
- Assigned functional capabilities (user codes, access to equipment, data or restricted areas, keys) are to be used <u>ONLY</u> to perform my assigned duties;
- Any breach of confidentiality or abuse of my position will result in dismissal from my job and possible judicial action.

I agree to follow all applicable policies and procedures with respect to confidentiality of records, equipment, user codes and general practices as outlined by my employer, and recognize that failure to do so will be grounds for disciplinary action by the Office of Student Conduct for violations of the Student Rights and Responsibilities (Code of Conduct). I have discussed this policy with my immediate supervisor.

Employee Printed Name	Date
Employee Signature	Date
Supervisor Printed Name	Date
Supervisor Signature	Date

This signed form should be forwarded to Payroll Services, Maytum Hall, with a copy retained in the employee's hiring department personnel file.

Prepared by:Information Security Committee, FredoniaReviewed by:President's CabinetAdopted on:6/02/2004Revision Date:7/25/2018