



MARIST

2007-2008 Stipend Authorization/Agreement Form

STUDENT NAME: _____
Last First M.I.

CWID: _____

Total Contracted Stipend Amount: _____

PAYROLL USE ONLY

Payroll Approved: _____

SUPERVISOR SECTION (To be completed by the supervisor only)

*** (EACH SUPERVISOR MUST KEEP TRACK OF STUDENT'S TIME)

Supervisor Name: _____

Campus Ext.: _____

Department/Office: _____

Budget Account Number(s)	Position Number	Period START Date	Period END Date	Total STIPEND Amount	Number of Pay Periods	Earnings Bi-Weekly

Start and End Dates Must Coincide with Student Payroll Schedule

Student Job Title(s): _____

*** Attach Copy of Job Description***

STUDENT SECTION (Please Print Clearly)

Circle: FRESHMAN SOPHOMORE JUNIOR SENIOR GRADUATE

Campus/Local Address: _____
Street/PO Box City State Zip

Campus/Local Phone: _____ Permanent Phone: _____

Permanent Mailing Address: _____

E-mail: _____

LABOR RESTRICTIONS (These Restrictions MAY NOT apply to Stipend Employees)

- A student may not work more than 20 weekly hours in total for ALL campus jobs. A student may not work more than six consecutive hours in one day without taking at least a half hour unpaid break.
- A student shall not be employed in a department where one relative exercises indirect or direct supervision over the student.
- A student may not work more than eight hours per day. (No overtime allowed)
- There will be no holiday pay.
- A student cannot be paid for receiving instruction in a classroom, laboratory, or other academic setting.

PAPERWORK

- All first time hires must complete the I-9 and the federal (W-4), and state (IT-2104) tax forms in the Marist College Payroll Office (DN 214).
- An authorization must be completed for *each position held*.
- Completed tax forms as well as Stipend Authorizations for first time hires must be returned to the Payroll Office (DN 214).
- Students who have previously worked on campus must return completed Stipend Authorization to the Office of Financial Aid (DN 200) before a student begins work.
- Financial Aid will not process a Stipend Authorization if a student has not completed the

FINANCIAL AID USE ONLY

Processing Date: _____

Processor Initials: _____

necessary paperwork with the Payroll Office.

- The Student agrees and accepts the terms of this stipend and will be paid the Total Contracted Stipend Amount over the pay periods indicated for the job title indicated above.

PAYROLL

- Student payroll checks can be picked up in the Business Office (DN 210) 10:00am-4:00pm on the designated pay dates (Friday) listed on the payroll schedule. Students that miss the designated pay date may pick up their paychecks from the Payroll Office (DN 214).
- It is the student's responsibility to notify the Payroll Office of address changes.

TAX WITHHOLDINGS

- Any form of cash compensation given to students for their services must be processed through the student payroll.
- All earnings will be subject to both federal and state taxes, and will be shown on a W-2 at the end of the calendar year. (Students may claim "EXEMPT" status each year by completing a new W-4 (federal) and IT-2104E (state) prior to February 15 of the new year.)

CONFIDENTIALITY AGREEMENT FOR STUDENT EMPLOYMENT

As a student employed by Marist College, I agree to the following provisions regarding the confidentiality of information that I have access to through my employment. I understand that any violation of this agreement may result in disciplinary action:

1. I will not release any information to any individual which becomes known to me through my employment.
2. I will take responsibility to protect any account from unauthorized access.
3. I will respect the privacy of information stored on the Marist computer system. I agree not to modify, in any way, information belonging to the office in which I am employed, unless otherwise instructed to do so by my supervisor.
4. I agree to use carefully and responsibly any computer devices made available to me, and recognize that I may be responsible for any loss, damage, or destruction of such devices that is caused by my negligence, misuse, abuse, or carelessness.
5. I will neither access nor make available to any individual the office computer facilities for unauthorized purposes.

I UNDERSTAND AND ACCEPT THE ABOVE STATED PAYROLL REGULATIONS REGARDING MY STIPEND

SIGNATURES: This form will not be considered an official document until all signatures appear below.

Student: _____

Date: _____

Supervisor: _____

Date: _____

Student Employment Director: _____

Date: _____