

New Student Employee Checklist

GETTING STARTED:

 1) Completion of the University's Background Check a) After your supervisor has initiated a hiring proposal in PeopleAdmin, the SE Team will initiate an email from HireRight Customer Support, using the email address provided on your application. b) Follow the steps in the email to complete and submit the authorization form.
2) Complete the I-9 Employment Authorization Form – Use the following link –
https://hrx.talx.com/ec/#/login/17682/Template/6c35ea4a-367e-4b3b-b84d-
c0bf29fe2e46?Required=True
a) Note "Forms of Identification" needed to complete the process b) Must have any item from List A or a combination of any from List B plus any from List C
b) Must have one item from List A or a combination of one from List B plus one from List C
3) Complete the Employment Packet – Available on the Student Employment Portal under the "Getting Started" Section
a) Work-Study or Student Hourly employees use the "New Student Employee Packet"
 b) International Student Employees use the "New International Student Employee Packet" c) TIP: We recommend you save the packet to your desktop and open it up from the desktop, as this will allow you to fill it out electronically and use digital signatures.
HOW TO SUBMIT THE PACKET & SUPPORT DOCUMENTS:
1) Submit the items below by using the Student Employment Liquid Files Drop Box Link -
https://secureshare.msudenver.edu/filedrop/StudentEmploymentDropbox
a. Please use Microsoft Lens to take pictures of your voided check or for other pertinent information. PLEASE NOTE: Some documents will require that you have Adobe Reader installed on your computer. <u>Download and install</u> the FREE Adobe Reader for Macintosh or Windows.
b. Please look at our How-To instructions below:
<u>Microsoft Lens</u>
How to insert signatures in Adobe Reader
Completed & Signed Employee Packet
U Voided Check or Letter from your bank with routing/account information (no bank statement
Class Schedule – detailed view showing credit hours from Student Hub
Work-study Award – must request through Financial Aid by turning in a WK form (i.e. WK2 2) Provide the required acceptable forms of identification necessary to verify employment, to the
HR Front Desk in the Jordan Student Success Building, Suite 310
Provide one item from List A or one item from List B plus one item from List C
NEXT STEPS:
1) You and your supervisor will receive a confirmation email with your eligible start date.
2) On the First Day of West.

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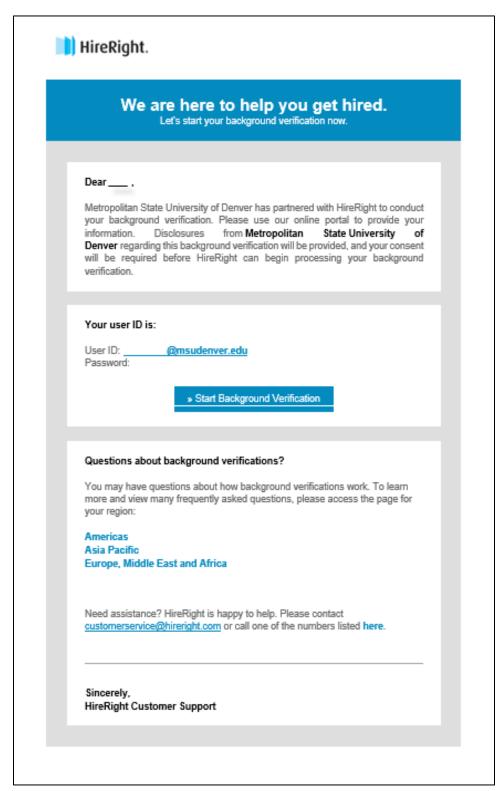
- 2) On your <u>First Day of Work</u>
 - a) Please watch the 3 videos covering online timesheets, paper timesheets and the
 - b) Please complete the brief quiz as validation this step has been completed.

For any Questions or if you need Assistance:

- **❖ CONTACT US AT:** <u>studentemployment@msudenver.edu</u> or 303-615-0999 (HR main line)
- **❖** STUDENT EMPLOYMENT PORTAL (SE Portal) https://msudenver.edu/se/



The Background Check Disclosure & Authorization form will be emailed to your MSU Denver email.



I-9 EMPLOYMENT ELIGIBILITY VERIFICATION FORM

Please complete the Employee Portion of the I-9 online at -

https://hrx.talx.com/ec/#/login/17682/Template/6c35ea4a-367e-4b3b-b84d-c0bf29fe2e46?Required=True

- 1) Select MSU Denver Main Campus and click "Continue"
- 2) "Welcome to your Employment Center" click "Continue"



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- 3) Complete the "Personal Information" Section
 - Fill in the required details
 - Sign the bottom of the form using your initials.
 - At the bottom select "continue".
- 4) Complete the "I-9" Section
- Fill in your Employment Date. Select your Citizenship. • At the bottom select "continue". 5) Review and verify that your information is
- correct
 - At the bottom you will complete your electronic signature
 - Select "continue"

attest that I have read, unders	tand, and agree to the statements appearing in the form I-9 in addition to the following:
By providing your signature bel	ow, your
	gn this document. But growides for imprisonment and/or fines for false statements or use of false documents in connection with the completion of this form. Coyer may electronically verify your work authorization with the United States Government.

- 6) Summary Page
 - You have the option to email a copy to yourself if you wish to retain a copy for your records
- 7) Select "continue" one last time to SAVE everything.
- 8) Bring in the acceptable Forms of Identification to your orientation session (see next page)
 - One item from List A Or
 - One item from List B plus one item from List C

LISTS OF ACCEPTABLE DOCUMENTS All documents must be UNEXPIRED

Employees may present one selection from List A or a combination of one selection from List B and one selection from List C.

	LIST A Documents that Establish Both Identity and Employment Authorization	OR	LIST B Documents that Establish Identity	۱D	LIST C Documents that Establish Employment Authorization
3.	U.S. Passport or U.S. Passport Card Permanent Resident Card or Alien Registration Receipt Card (Form I-551) Foreign passport that contains a temporary I-551 stamp or temporary I-551 printed notation on a machine- readable immigrant visa Employment Authorization Document that contains a photograph (Form I-766) For a nonimmigrant alien authorized		 Driver's license or ID card issued by a State or outlying possession of the United States provided it contains a photograph or information such as name, date of birth, gender, height, eye color, and address ID card issued by federal, state or local government agencies or entities, provided it contains a photograph or information such as name, date of birth, gender, height, eye color, and address School ID card with a photograph 	2.	by the Department of State (Forms DS-1350, FS-545, FS-240)
3.	to work for a specific employer because of his or her status: a. Foreign passport; and b. Form I-94 or Form I-94A that has the following: (1) The same name as the passport; and	_	 Voter's registration card U.S. Military card or draft record Military dependent's ID card U.S. Coast Guard Merchant Mariner Card 	4.	certificate issued by a State, county, municipal authority, or territory of the United States bearing an official seal
	(2) An endorsement of the alien's nonimmigrant status as long as that period of endorsement has not yet expired and the proposed employment is not in conflict with any restrictions or limitations identified on the form.		Native American tribal document Driver's license issued by a Canadian government authority For persons under age 18 who are unable to present a document listed above:	7.	Identification Card for Use of Resident Citizen in the United States (Form I-179) Employment authorization document issued by the Department of Homeland Security
6.	Passport from the Federated States of Micronesia (FSM) or the Republic of the Marshall Islands (RMI) with Form I-94 or Form I-94A indicating nonimmigrant admission under the Compact of Free Association Between the United States and the FSM or RMI		 School record or report card Clinic, doctor, or hospital record Day-care or nursery school record 		

Examples of many of these documents appear in the Handbook for Employers (M-274).

Refer to the instructions for more information about acceptable receipts.

Form I-9 10/21/2019 Page 3 of 3



Correction Agreement

Employee Name:	90_#:
The Employee acknowledges that follows (NHP), a review of the packet will be perform Occasionally, these reviews identify errors made by the Employee when filling out and sections of the NHP that were not correctly on name, and date).	ade by the Supervisor in their sections, or signing the NHP, including but not limited to
As an accommodation, the Human Re any authorized section in the NHP on the Em Employee of any corrections made. It is unde correction or completion of acknowledgment Direct Deposit Form, or any signature fields. corrections to the Form W-4 and Direct Depositeds, and submit it to the Human Resources	erstood that any such modification, may not be performed on the Form W-4, It will be up to the Employee to make any sit Form, and sign any missing signature
The Employee agrees to allow MSU D make these changes on behalf of the Employ only the necessary changes described above	·

Date: _____ Signature: _____



Employee Data Sheet

STATE UNIVERSITY**		Date:			
OF DENVER		900# (if kn	own):		
		Start I	Date:		
		Hiring Departn	nent:		
		New Employee or Returning	Employee (please circle one)		
First Name:	MI:	Last Name:			
Social Security Number:	Date of Birth:				
Street Address:		City, State, Zip:			
Personal Email:		•	ll or Home		
		(Plé	ease circle)		
EMERGENCY CONTACT INFORM	ATION:				
Name of Contact		Telephone Number:			
Street Address: (if different from	n ahovol	City, State, Zip:			
Street Address. (II different from	i abovej	City, State, Zip.			
Citizenship Status: If Other than	a United States Citizen:				
Visa Type:	Country:	Visa Exp. Date:			



Equal Employment Opportunity (EEO) Gender & Ethnicity Self Disclosure Form

Disclosure of self-identification information is voluntary and responses will not be used in a discriminatory manner.
Gender: Female Male
Ethnicity (select one):
Hispanic/Latino, Chicano, Cuban, Puerto Rican, Mexican American
Non-Hispanic/Latino
Race (regardless of answer above, select all that apply):
American Indian or Alaskan Native – A person having origins in any of the original peoples of North and South America (including Central America), and who maintain cultural identification through tribal affiliation or community recognition.
Asian – A person having origins in any of the original peoples of the Far East, Southeast Asia, or the Indian subcontinent, including, for example, Cambodia, China, India, Japan, Korea, Malaysia, Pakistan, the Philippine Islands, Thailand and Vietnam.
Black or African-American – A person having origins in any of the black racial groups of Africa.
Native Hawaiian or Other Pacific Islander - A person having origins in any of the peoples of Hawaii, Guam, Samoa or other Pacific Islands.
White, Anglo, Caucasian – A person having origins in any of the original peoples of Europe, Middle East, or North Africa.



Voluntary Self-Identification of Veteran Status

Disclosure is voluntary and responses will not be used in a discriminatory manner

This employer is a Government contractor subject to the Vietnam Era Veterans' Readjustment Assistance Act of 1974, as amended by the Jobs for Veterans Act of 2002, 38 U.S.C. 4212 (VEVRAA), which requires Government contractors to take affirmative action to employ and advance in employment: (1) disabled veterans; (2) recently separated veterans; (3) active duty wartime or campaign badge veterans; and (4) Armed Forces service medal veterans.

If you believe you belong to any of the categories of protected veterans listed above, please indicate by checking the appropriate box below. As a Government contractor subject to VEVRAA, we request this information in order to measure the effectiveness of the outreach and positive recruitment efforts we undertake pursuant to VEVRAA.

hese classifications are defined as follows:						
I am not a Veteran.						
I am not a protected veteran.						
A " <u>disabled veteran</u> " is one of the following:						
 A veteran of the U.S. military, ground, naval or air service who is entitled to compensation (or who but for the receipt of military retired pay would be entitled to compensation) under laws administered by the Secretary of Veterans Affairs; or 						
A person who was discharged or released from active duty because of a service-connected disability.						
A " <u>recently separated veteran</u> " means any veteran during the three-year period beginning on the date of such eteran's discharge or release from active duty in the U.S. military, ground, naval, or air service.						
Date of Separation:						
An " <u>active duty wartime or campaign badge veteran</u> " means a veteran who served on active duty in the U.S. nilitary, ground, naval or air service during a war, or in a campaign or expedition for which a campaign badge has been uthorized under the laws administered by the Department of Defense.						
An " <u>Armed forces service medal veteran</u> " means a veteran who, while serving on active duty in the U.S. nilitary, ground, naval or air service, participated in a United States military operation for which an Armed Forces ervice medal was awarded pursuant to Executive Order 12985.						
rotected veterans may have additional rights under USERRA—the Uniformed Services Employment and Reemployment in Graph Service in the Uniformed Service in the Uniformed Service, you have entitled to be reemployed by your employer in the position you would have obtained with reasonable certainty for the absence due to service. For more information, call the U.S. Department of Labor's Veterans Employment and Training Service (VETS), toll-free, at 1-866-4-USA-DOL.						
MPLOYEE SIGNATURE: DATE:						



EMPLOYEE NOTIFICATION OF WORKER'S COMPENSATION PROCEDURES*

I, (print your name),	have been notified
by my employer/supervisor of the Worker's Compensation Procedures. In the event	I am involved in a
work related injury or illness, I understand that MSU Denver has designated Concent	tra Medical Center,
Midtown Occupational Health Services, and CareNow Urgent Care as the approved in	medical providers
for all work related injuries or illnesses. I understand that if I do not receive medical α	care for work
related injuries or illnesses from the designated clinic or an approved 24-hour after	care facility, or any
specialists to which they refer me, EXCEPT IN THE CASE OF A SERIOUS EMERGENCY	;I could be
financially responsible for payment of that care. I have received the above reference	d procedures and
have been informed that authorization is required from my employer before I seek r	medical care for
non-emergency, work related injuries or illnesses.	
Signature	Date

*Submit to Human Resources after signature



Metropolitan State University of Denver Confidentiality Agreement – Federal Educational Rights and Privacy Act

Federal Educational Rights and Privacy Act (FERPA)

FERPA is a federal law protecting the privacy of a student's educational records and applies to any educational institutions that receive funds under any program administered by the U.S. Department of Education. Violation to FERPA would result to the University losing the ability to provide financial aid to our students.

FERPA rights belong to the student at a postsecondary institution regardless of age. Student applies to all students—including continuing education students, students auditing a class, distance education students, and former students.

Metropolitan State University of Denver maintains educational records for each student who has enrolled at the University. Under the Family Education Rights and Privacy Act of 1974, 20 USC 1232g, and the implementing regulations published at 34 CFR part 99, each eligible student has the right to:

- 1. Inspect and review his/her educational records;
- 2. Request the amendment of the student's education records to ensure that they are not inaccurate, misleading or otherwise in violation of the student's privacy or other rights;
- 3. Consent to the extent that FERPA authorizes disclosure without consent (see Nondisclosure and Exceptions in the University catalog under Student's Rights and Responsibilities.
- 4. File a complaint under 34 CFR 99.64, concerning alleged failures by the University to comply with the requirements of FERPA, with the Family Compliance Office, U.S. Department of Education.

As a staff or faculty member at MSU Denver, it is your responsibility to oversee and uphold the rights of FERPA grants to our students. Basic guidelines include:

- Do not display any personally identifiable data or information which includes, but is not limited to student's name, the name of the student's parent or other family members, the address of the student or student's family, a personal identifier such as SSN, student number or biometric record. Other indirect identifiers such as the student's date of birth, place of birth, mother's maiden name, or other information alone or in combination that is linked to a specific student.
- Student educational records are considered confidential and cannot be released without the student's prior written consent.
- As a student worker, staff, or faculty member, you are given access to student educational records for the sole purpose of performing your job. It is your responsibility to protect educational records whenever they are used and regardless of the medium in which they are accessed.
- Do not use anyone else's username or password or allow anyone to use yours. Log out of Banner when not in use and lock your computer when you walk away.
- When in doubt, do not give it out. Do not hesitate to call the Office of the Registrar at 303-556-3991 for any FERPA guidance.

I	have read	l and	l agree t	o the a	bove res	ponsibili	ties rec	gardıng	FERPA r	egulat	ıons:
								, ,			

Name:	900#
Signature:	Date:



STUDENT EMPLOYEE HANDBOOK ACKNOWLEDGMENT

I have been given a copy or have received access to the MSU Denver's *Student Employee Handbook*. I acknowledge that I have read and understood the policies and procedures of the *Student Employee Handbook* and understand that failure to comply with the stated policies may lead to my termination.

If you require policy interpretation and/or have questions in regards to your student employment, please contact the HR Student Employment Team at studentemployment@msudenver.edu.

The handbook is available on the Student Employment Portal at: https://msudenver.edu/se/studentresources/Student%20Employment%20Handbook

Student Name:	900#:
Student Signature:	Date:

Statement Concerning Your Employment in a Job Not Covered by Social Security

Employee Name	Employee ID#			
Employer Name	Employer ID#			
you may receive a pension based on earnings from this	the work of your husband or wife, or former husband or Security benefit you receive. Your Medicare benefits,			
Windfall Elimination Provision				
modified formula when you are also entitled to a pension As a result, you will receive a lower Social Security ber				
you are eligible for a \$500 widow(er) benefit, you will re \$400=\$100). Even if your pension is high enough to to	ffset your Social Security spouse or widow(er) benefit. If eceive \$100 per month from Social Security (\$500 -			
For More Information Social Security publications and additional information, provision, are available at www.socialsecurity.gov . You or hard of hearing call the TTY number 1-800-325-077.	may also call toll free 1-800-772-1213, or for the deaf			
I certify that I have received Form SSA-1945 that co Windfall Elimination Provision and the Governmen Social Security Benefits.	ontains information about the possible effects of the t Pension Offset Provision on my potential future			
Signature of Employee	Date			

Voluntary Self-Identification of Disability Form CC-305 Page 1 of 1 OMB Control Number 1250-0005 Expires 05/31/2023 Date: Employee ID: (if applicable) Why are you being asked to complete this form?

We are a federal contractor or subcontractor required by law to provide equal employment opportunity to qualified people with disabilities. We are also required to measure our progress toward having at least 7% of our workforce be individuals with disabilities. To do this, we must ask applicants and employees if they have a disability or have ever had a disability. Because a person may become disabled at any time, we ask all of our employees to update their information at least every five years.

Identifying yourself as an individual with a disability is voluntary, and we hope that you will choose to do so. Your answer will be maintained confidentially and not be seen by selecting officials or anyone else involved in making personnel decisions. Completing the form will not negatively impact you in any way, regardless of whether you have self-identified in the past. For more information about this form or the equal employment obligations of federal contractors under Section 503 of the Rehabilitation Act, visit the U.S. Department of Labor's Office of Federal Contract Compliance Programs (OFCCP) website at www.dol.gov/ofccp.

How do you know if you have a disability?

You are considered to have a disability if you have a physical or mental impairment or medical condition that substantially limits a major life activity, or if you have a history or record of such an impairment or medical condition. *Disabilities include, but are not limited to:*

- Autism
- Autoimmune disorder, for example,
 lupus, fibromyalgia, rheumatoid
 arthritis, or HIV/AIDS
- Blind or low vision
- Cancer
- Cardiovascular or heart disease
- Celiac disease
- Cerebral palsy

- Deaf or hard of hearing
- Depression or anxiety
- Diabetes
- Epilepsy
- Gastrointestinal disorders, for example, Crohn's Disease, or irritable bowel syndrome
- Intellectual disability

- Missing limbs or partially missing limbs
- Nervous system condition for example, migraine headaches, Parkinson's disease, or Multiple sclerosis (MS)
- Psychiatric condition, for example, bipolar disorder, schizophrenia, PTSD, or major depression

P	lease	check	one	of	the	boxes	be	low:
---	-------	-------	-----	----	-----	-------	----	------

Yes, I Have A Disability, Or Have A History/Record Of Having A Disability
No, I Don't Have A Disability, Or A History/Record Of Having A Disability
I Don't Wish To Answer

PUBLIC BURDEN STATEMENT: According to the Paperwork Reduction Act of 1995 no persons are required to respond to a collection of information unless such collection displays a valid OMB control number. This survey should take about 5 minutes to complete.



PRWORA Form

The **Personal Responsibility and Work Opportunity Reconciliation Act** (PRWORA) of 1996, known as welfare reform, require all employers to report certain information on their newly hired employees to a designated state agency within time parameters.

For additional information, visit the U.S. Department of Health and Human Services, Administration for Children and Families website:

http://www.acf.hhs.gov/programs/css/resource/new-hire-reporting-answers-to-employer-questions

PLEASE PRINT LEGIBLY IN BLACK OR BLUE INK:

Na	me:
Soc	ial Security Number:
Ado	dress:
City	/, State, Zip:
For Human Reso	ources:
Hir	e Date:
TO:	Colorado Department of Human Services
FROM:	Metropolitan State University of Denver
	P.O. Box 173362, Campus Box 47
	Denver, CO 80217-3362
	Federal Employer I.D. Number: 84-0559160



PERA INFORMATION

As a result of Senate Bill 04-257, effective July 1, 2005, PERA employers are required to begin paying employer contribution salaries paid to PERA retirees. To ensure that we have correct information on our employee population, please complete this form and return it with your contract to the Office of Human Resources. If you have questions, please contact the Office of Human Resources at 303-615-0999.

I am not a retiree.								
I am a PERA retiree and currently receiving a monthly benefit.								
I am receiving a retirement benefit from another retirement plan other than PERA.								
Plan Name:								
Print Name	Date							
Signature								



Metropolitan State University of Denver Student Employment – Employment Eligibility Form for International Students

An international student attending MSU Denver on an F-1 or J-1 visa is eligible to work on-campus without official INS approval if that student is maintaining legal status. This form will verify that the student is maintaining legal status and must be completed PRIOR to the first day of school or within three (3) days after beginning student employment at MSU Denver. The student's failure to present this form to their international student advisor for verification may result in termination of employment. This form must be submitted to the Office of Human Resources **EVERY** semester the student intends to work on campus. **NOTE**: UC-Denver and CCD students must have approval from their institution.

TO BE COMPLETED BY THE STUDENT						
Student's Name:	Student 900#:					
Department of Potential Employment						
Name of Supervisor:	Phone Extension:					
Please answer <u>one</u> of the following two questio	ns:					
Semester of <i>current</i> enrollment: Year: Please attach a print out of your current enrollment.						
2. I am <i>neither</i> currently registered <i>nor</i> am I attend following semester:	ling classes, but have or am intending to register for the					
Year: Proof of full time (12 credits) enrollment for las	Please check one: Fall Spring Summer st semester must be attached.					
	egal status changes. I understand that if I falsify information, I work more than 20 hours per week when school is in session al school breaks.					
	PPORT CENTER FOR MSU DENVER: CENTER AT intlsupport@msudenver.edu to setup an					
appointment.						
Visa Type: Valid Until:						
I certify that the above named student is maintaining legal s hours per week during the fall and spring semesters.)	tatus and is eligible for on campus employment (not to exceed 20					
Signature:	Date:					
Printed Name:	Phone:					

(Rev. November 2013)



Supplemental Form W-4 Instructions for Nonresident Aliens

Nonresident aliens must follow special instructions when completing Form W-4, Employee's Withholding Allowance Certificate, for compensation paid to such individuals as employees performing dependent personal services in the United States. Compensation for dependent personal services includes amounts paid as wages, salaries, fees, bonuses, commissions, compensatory scholarships, fellowship income, and similar designations for amounts paid to an employee.

Note. Form W-4, and the other IRS forms and publications referenced in this notice, are available at www.irs.gov/formspubs or by calling 1-800-829-3676.

Are you a nonresident alien? If so, these special instructions apply to you. Resident aliens should follow the instructions on Form W-4.

If you are an alien individual (that is, an individual who is not a U.S. citizen), specific rules apply to determine if you are a resident alien or a nonresident alien for federal income tax purposes. Generally, you are a resident alien if you meet either the "green card test," or the "substantial presence test," for the calendar year. Any alien individual not meeting either test is generally a nonresident alien. Additionally, a dual-resident alien who applies the so-called "tie-breaker" rules contained within the Resident (or Residence or Fiscal Residence) article of an applicable U.S. income tax treaty in favor of the other Contracting State is treated as a nonresident alien. See Publication 519, U.S. Tax Guide for Aliens, for more information on the green card test and the substantial presence test.

What compensation is subject to withholding and requires a Form W-4?

Compensation paid to a nonresident alien for performing personal services as an employee in the United States is subject to graduated withholding. Compensation for personal services also includes amounts paid as a scholarship or fellowship grant to the extent it represents payment for past, present, or future services performed as an employee in the United States. Nonresident aliens must complete Form W-4 using the modified instructions provided later, so that employers can withhold the correct amount of federal income tax from compensation paid for personal services performed in the United States. This Notice modifies the instructions on Form W-4 to take into account the restrictions on a nonresident alien's filing status, the limited number of personal exemptions allowed, and the restriction on claiming the standard deduction.

Are there any exceptions to this withholding?

Yes. Nonresident aliens may be exempt from wage withholding on the following amounts.

- Compensation paid to employees of foreign employers if such pay is not more than \$3,000 and the employee is temporarily present in the United States for not more than a total of 90 days during the tax year.
- Compensation paid to regular crew members of a foreign vessel.
- Compensation paid to residents of Canada or Mexico engaged in transportation-related employment.
- Certain compensation paid to residents of American Samoa, Puerto Rico, or the U.S. Virgin Islands.
- Compensation paid to foreign agricultural workers temporarily admitted into the United States on H-2A visas.

See Publication 519 to see if you qualify for one of these exemptions.

Nonresident aliens may be exempt from wage withholding on part or all of their compensation for dependent personal services under an income tax treaty. If you are claiming a tax treaty withholding exemption, do not complete Form W-4. Instead, complete Form 8233, Exemption from Withholding on Compensation for Independent (and Certain Dependent) Personal Services of a Nonresident Alien Individual, and give it to each withholding agent from whom amounts will be received. Even if you submit Form 8233, the withholding agent may have to withhold tax from your income because the factors on which the treaty exemption is based may not be determinable until after the close of the tax year. In this case, you must file Form 1040NR, U.S. Nonresident Alien Income Tax Return, (or Form 1040NR-EZ, U.S. Income Tax Return for Certain Nonresident Aliens With No Dependents, if you qualify), to recover any overwithheld tax and to provide the IRS with proof that you are entitled to the treaty exemption. See Form 8233 and the Instructions for Form 8233, Publication 901, U.S. Tax Treaties, and Publication 519 for more information on treaty benefits.

Am I required to file a U.S. tax return even if I am a nonresident alien?

Yes. Nonresident aliens who perform personal services in the United States are considered to be engaged in a trade or business in the United States and generally are required to file Form 1040NR (or Form 1040NR-EZ). However, if your only U.S. trade or business was the performance of personal services and the amount of compensation is less than the

IRS.gov Catalog No. 54303E

personal exemption amount for the year (listed in Publication 519), then you may not need to file Form 1040NR (or Form 1040NR-EZ). Also, you do need to file Form 1040NR (or Form 1040NR-EZ) to claim a refund of any overwithheld taxes. See the Instructions for Form 1040NR, or the Instructions for Form 1040NR-EZ, for more information.

Nonresident aliens who are bona fide residents of U.S. possessions should consult Publication 570, Tax Guide for Individuals With Income From U.S. Possessions, for information on whether compensation is subject to wage withholding in the United States.

Will my withholding amounts be different from withholding for my U.S. co-workers?

Yes. Nonresident aliens cannot claim the standard deduction. The benefits of the standard deduction are included in the existing wage withholding tables published in Publication 15 (Circular E), Employer's Tax Guide.

Because nonresident aliens do not qualify for the standard deduction, employers are instructed to withhold an additional amount from a nonresident alien's wages. For the specific amounts to be added to wages before application of the wage tables, see Publication 15.

Note. A special rule applies to students and business apprentices from India who are eligible for the benefits of Article 21(2) of the United States-India income tax treaty, because such individuals may be entitled to claim an additional withholding allowance for the standard deduction. See Publication 519 for more information.

What are the special Form W-4 instructions?

Nonresident aliens should pay particular attention to the following lines when completing Form W-4.

Line 2. You are required to enter a social security number (SSN) on line 2 of Form W-4. If you do not have an SSN, you must apply for one on Form SS-5, Application for a Social Security Card.

You can get Form SS-5 at http://www.ssa.gov/ssnumber/ss5.htm or from any Social Security Administration (SSA) office.

Note. You cannot enter an individual taxpayer identification number (ITIN) on line 2 of Form W-4.

Line 3. Check the single box regardless of your actual marital status.

Line 5. Generally, you should claim one withholding allowance. However, if you are a resident of Canada, Mexico, or South Korea, a student or business apprentice from India, or a U.S. national, you may be able to claim additional withholding allowances for your spouse and children. See Publication 519 for more information.

If you are completing Form W-4 for more than one withholding agent (for example, you have more than one employer), figure the total number of allowances you are entitled to claim and claim no more than that amount on all Forms W-4 combined. Your withholding usually will be most accurate when all allowances are claimed on the Form W-4 for the highest-paying job and zero allowances are claimed on the others.

Line 6. Write "nonresident alien" or "NRA" on the dotted line. If you would like to have an additional amount withheld, enter the amount on line 6.

Line 7. Do not claim that you are exempt from withholding on line 7 of Form W-4 (even if you meet both of the conditions listed on that line).

IRS.gov Catalog No. 54303E

Employee's Withholding Certificate

► Complete Form W-4 so that your employer can withhold the correct federal income tax from your pay.

► Give Form W-4 to your employer.

Internal Revenue Ser	vice	➤ Your withhold	ling is subject to review by the I	RS.								
Step 1:	(a)	irst name and middle initial	Last name		(b) S	Social security number						
Enter Personal Information	Addr	or town, state, and ZIP code	▶ Does your name match the name on your social security card? If not, to ensure you get credit for your earnings, contact 1500 at 200,773, 4110, greater									
			at 800-772-1213 or go to .ssa.gov.									
	(c)	c) Single or Married filing separately										
		Married filing jointly or Qualifying widow(er)										
		Head of household (Check only if you're unma	rried and pay more than half the costs	of keeping up a home for yo	urself a	and a qualifying individual.						
-	-	4 ONLY if they apply to you; otherwing withholding, when to use the estimate			n on e	each step, who can						
Step 2: Multiple Job	s	Complete this step if you (1) hold mo also works. The correct amount of wi										
or Spouse		Do only one of the following.										
Works		(a) Use the estimator at www.irs.gov		-		•						
		(b) Use the Multiple Jobs Worksheet on page 3 and enter the result in Step 4(c) below for roughly accurate withholding; or										
		(c) If there are only two jobs total, yo option is accurate for jobs with si	•			•						
		TIP: To be accurate, submit a 2022 Fincome, including as an independent			nave s	self-employment						
		-4(b) on Form W-4 for only ONE of the you complete Steps 3–4(b) on the Form			s. (Yo	our withholding will						
Step 3:		If your total income will be \$200,000	or less (\$400,000 or less if ma	arried filing jointly):								
Claim		Multiply the number of qualifying c	.									
Dependents		Multiply the number of other depe										
		Add the amounts above and enter the	e total here		3	\$ \$						
Step 4 (optional): Other		(a) Other income (not from jobs). expect this year that won't have very thing the second of the seco	withholding, enter the amount			a) \$						
Adjustments	6	(b) Deductions. If you expect to clair want to reduce your withholding, the result here			.	o) \$						
		(c) Extra withholding. Enter any add	itional tax you want withheld e	each pay period	4(0	c) \$						
Step 5:	Und	er penalties of perjury, I declare that this cer	tificate, to the best of my knowled	dge and belief, is true, co	orrect,	and complete.						
Sign Here												
	F	mployee's signature (This form is not	valid unless you sign it.)	Dat	te							
Employers Only Employer's name and address First date of employment					Employer identification number (EIN)							

Form W-4 (2022) Page **2**

General Instructions

Section references are to the Internal Revenue Code.

Future Developments

For the latest information about developments related to Form W-4, such as legislation enacted after it was published, go to www.irs.gov/FormW4.

Purpose of Form

Complete Form W-4 so that your employer can withhold the correct federal income tax from your pay. If too little is withheld, you will generally owe tax when you file your tax return and may owe a penalty. If too much is withheld, you will generally be due a refund. Complete a new Form W-4 when changes to your personal or financial situation would change the entries on the form. For more information on withholding and when you must furnish a new Form W-4, see Pub. 505, Tax Withholding and Estimated Tax.

Exemption from withholding. You may claim exemption from withholding for 2022 if you meet both of the following conditions: you had no federal income tax liability in 2021 and you expect to have no federal income tax liability in 2022. You had no federal income tax liability in 2021 if (1) your total tax on line 24 on your 2021 Form 1040 or 1040-SR is zero (or less than the sum of lines 27a, 28, 29, and 30), or (2) you were not required to file a return because your income was below the filing threshold for your correct filing status. If you claim exemption, you will have no income tax withheld from your paycheck and may owe taxes and penalties when you file your 2022 tax return. To claim exemption from withholding, certify that you meet both of the conditions above by writing "Exempt" on Form W-4 in the space below Step 4(c). Then, complete Steps 1(a), 1(b), and 5. Do not complete any other steps. You will need to submit a new Form W-4 by February 15, 2023.

Your privacy. If you prefer to limit information provided in Steps 2 through 4, use the online estimator, which will also increase accuracy.

As an alternative to the estimator: if you have concerns with Step 2(c), you may choose Step 2(b); if you have concerns with Step 4(a), you may enter an additional amount you want withheld per pay period in Step 4(c). If this is the only job in your household, you may instead check the box in Step 2(c), which will increase your withholding and significantly reduce your paycheck (often by thousands of dollars over the year).

When to use the estimator. Consider using the estimator at *www.irs.gov/W4App* if you:

- 1. Expect to work only part of the year;
- 2. Have dividend or capital gain income, or are subject to additional taxes, such as Additional Medicare Tax;
- 3. Have self-employment income (see below); or
- 4. Prefer the most accurate withholding for multiple job situations.

Self-employment. Generally, you will owe both income and self-employment taxes on any self-employment income you receive separate from the wages you receive as an employee. If you want to pay these taxes through withholding from your wages, use the estimator at www.irs.gov/W4App to figure the amount to have withheld.

Nonresident alien. If you're a nonresident alien, see Notice 1392, Supplemental Form W-4 Instructions for Nonresident Aliens, before completing this form.

Specific Instructions

Step 1(c). Check your anticipated filing status. This will determine the standard deduction and tax rates used to compute your withholding.

Step 2. Use this step if you (1) have more than one job at the same time, or (2) are married filing jointly and you and your spouse both work.

Option (a) most accurately calculates the additional tax you need to have withheld, while option (b) does so with a little less accuracy.

If you (and your spouse) have a total of only two jobs, you may instead check the box in option **(c)**. The box must also be checked on the Form W-4 for the other job. If the box is checked, the standard deduction and tax brackets will be cut in half for each job to calculate withholding. This option is roughly accurate for jobs with similar pay; otherwise, more tax than necessary may be withheld, and this extra amount will be larger the greater the difference in pay is between the two jobs.



Multiple jobs. Complete Steps 3 through 4(b) on only one Form W-4. Withholding will be most accurate if you do this on the Form W-4 for the highest paying job.

Step 3. This step provides instructions for determining the amount of the child tax credit and the credit for other dependents that you may be able to claim when you file your tax return. To qualify for the child tax credit, the child must be under age 17 as of December 31, must be your dependent who generally lives with you for more than half the year, and must have the required social security number. You may be able to claim a credit for other dependents for whom a child tax credit can't be claimed, such as an older child or a qualifying relative. For additional eligibility requirements for these credits, see Pub. 501, Dependents, Standard Deduction, and Filing Information. You can also include other tax credits for which you are eligible in this step, such as the foreign tax credit and the education tax credits. To do so, add an estimate of the amount for the year to your credits for dependents and enter the total amount in Step 3. Including these credits will increase your paycheck and reduce the amount of any refund you may receive when you file your tax return.

Step 4 (optional).

Step 4(a). Enter in this step the total of your other estimated income for the year, if any. You shouldn't include income from any jobs or self-employment. If you complete Step 4(a), you likely won't have to make estimated tax payments for that income. If you prefer to pay estimated tax rather than having tax on other income withheld from your paycheck, see Form 1040-ES, Estimated Tax for Individuals.

Step 4(b). Enter in this step the amount from the Deductions Worksheet, line 5, if you expect to claim deductions other than the basic standard deduction on your 2022 tax return and want to reduce your withholding to account for these deductions. This includes both itemized deductions and other deductions such as for student loan interest and IRAs.

Step 4(c). Enter in this step any additional tax you want withheld from your pay **each pay period**, including any amounts from the Multiple Jobs Worksheet, line 4. Entering an amount here will reduce your paycheck and will either increase your refund or reduce any amount of tax that you owe.

Form W-4 (2022)

Step 2(b) – Multiple Jobs Worksheet (Keep for your records.)



If you choose the option in Step 2(b) on Form W-4, complete this worksheet (which calculates the total extra tax for all jobs) on **only ONE** Form W-4. Withholding will be most accurate if you complete the worksheet and enter the result on the Form W-4 for the highest paying job.

Note: If more than one job has annual wages of more than \$120,000 or there are more than three jobs, see Pub. 505 for additional tables; or, you can use the online withholding estimator at *www.irs.gov/W4App*.

1	Two jobs. If you have two jobs or you're married filing jointly and you and your spouse each have one job, find the amount from the appropriate table on page 4. Using the "Higher Paying Job" row and the "Lower Paying Job" column, find the value at the intersection of the two household salaries and enter that value on line 1. Then, skip to line 3	1	\$
2	Three jobs. If you and/or your spouse have three jobs at the same time, complete lines 2a, 2b, and 2c below. Otherwise, skip to line 3.		
	a Find the amount from the appropriate table on page 4 using the annual wages from the highest paying job in the "Higher Paying Job" row and the annual wages for your next highest paying job in the "Lower Paying Job" column. Find the value at the intersection of the two household salaries and enter that value on line 2a	2 a	\$
	b Add the annual wages of the two highest paying jobs from line 2a together and use the total as the wages in the "Higher Paying Job" row and use the annual wages for your third job in the "Lower Paying Job" column to find the amount from the appropriate table on page 4 and enter this amount on line 2b	2b	\$
	c Add the amounts from lines 2a and 2b and enter the result on line 2c	2c	\$
3	Enter the number of pay periods per year for the highest paying job. For example, if that job pays weekly, enter 52; if it pays every other week, enter 26; if it pays monthly, enter 12, etc	3	
4	Divide the annual amount on line 1 or line 2c by the number of pay periods on line 3. Enter this amount here and in Step 4(c) of Form W-4 for the highest paying job (along with any other additional amount you want withheld)	4	\$
	Step 4(b) – Deductions Worksheet (Keep for your records.)		
1	Enter an estimate of your 2022 itemized deductions (from Schedule A (Form 1040)). Such deductions may include qualifying home mortgage interest, charitable contributions, state and local taxes (up to \$10,000), and medical expenses in excess of 7.5% of your income	1	\$
2	Enter: • \$25,900 if you're married filing jointly or qualifying widow(er) • \$19,400 if you're head of household • \$12,950 if you're single or married filing separately	2	\$
3	If line 1 is greater than line 2, subtract line 2 from line 1 and enter the result here. If line 2 is greater than line 1, enter "-0-"	3	\$
4	Enter an estimate of your student loan interest, deductible IRA contributions, and certain other adjustments (from Part II of Schedule 1 (Form 1040)). See Pub. 505 for more information	4	\$
5	Add lines 3 and 4. Enter the result here and in Step 4(b) of Form W-4	5	\$

Privacy Act and Paperwork Reduction Act Notice. We ask for the information on this form to carry out the Internal Revenue laws of the United States. Internal Revenue Code sections 3402(f)(2) and 6109 and their regulations require you to provide this information; your employer uses it to determine your federal income tax withholding. Failure to provide a properly completed form will result in your being treated as a single person with no other entries on the form; providing fraudulent information may subject you to penalties. Routine uses of this information include giving it to the Department of Justice for civil and criminal litigation; to cities, states, the District of Columbia, and U.S. commonwealths and possessions for use in administering their tax laws; and to the Department of Health and Human Services for use in the National Directory of New Hires. We may also disclose this information to other countries under a tax treaty, to federal and state agencies to enforce federal nontax criminal laws, or to federal law enforcement and intelligence agencies to combat terrorism.

You are not required to provide the information requested on a form that is subject to the Paperwork Reduction Act unless the form displays a valid OMB control number. Books or records relating to a form or its instructions must be retained as long as their contents may become material in the administration of any Internal Revenue law. Generally, tax returns and return information are confidential, as required by Code section 6103.

The average time and expenses required to complete and file this form will vary depending on individual circumstances. For estimated averages, see the instructions for your income tax return.

If you have suggestions for making this form simpler, we would be happy to hear from you. See the instructions for your income tax return.

Form W-4 (2022) Page **4**

			Marri	ed Filing	Jointly	or Quali	fvina Wi	dow(er)				r age 1
Married Filing Jointly or Qualifying Widow Higher Paying Job Lower Paying Job Annual Taxable Wag							Salarv					
Annual Taxable Wage & Salary	\$0 - 9,999	\$10,000 - 19,999	\$20,000 - 29,999	\$30,000 - 39,999	\$40,000 - 49,999	\$50,000 - 59,999	\$60,000 - 69,999	\$70,000 - 79,999	\$80,000 - 89,999	\$90,000 - 99,999	\$100,000 - 109,999	\$110,000 - 120,000
	\$0	\$110	\$850	\$860	\$1,020	\$1,020	\$1,020	\$1,020	\$1,020	\$1,020	\$1,770	\$1,870
\$10,000 - 19,999	110	1,110	1,860	2,060	2,220	2,220	2,220	2,220	2,220	2,970	3,970	4,070
\$20,000 - 29,999	850	1,860	2,800	3,000	3,160	3,160	3,160	3,160	3,910	4,910	5,910	6,010
\$30,000 - 39,999	860	2,060	3,000	3,200	3,360	3,360	3,360	4,110	5,110	6,110	7,110	7,210
\$40,000 - 49,999	1,020	2,220	3,160	3,360	3,520	3,520	4,270	5,270	6,270	7,270	8,270	8,370
\$50,000 - 59,999	1,020	2,220	3,160	3,360	3,520	4,270	5,270	6,270	7,270	8,270	9,270	9,370
\$60,000 - 69,999	1,020	2,220	3,160	3,360	4,270	5,270	6,270	7,270	8,270	9,270	10,270	10,370
\$70,000 - 79,999	1,020	2,220	3,160	4,110	5,270	6,270	7,270	8,270	9,270	10,270	11,270	11,370
\$80,000 - 99,999	1,020	2,820	4,760	5,960	7,120	8,120	9,120	10,120	11,120	12,120	13,150	13,450
\$100,000 - 149,999	1,870	4,070	6,010	7,210	8,370	9,370	10,510	11,710	12,910	14,110	15,310	15,600
\$150,000 - 239,999	2,040	4,440	6,580	7,980	9,340	10,540	11,740	12,940	14,140	15,340	16,540	16,830
\$240,000 - 259,999	2,040	4,440	6,580	7,980	9,340	10,540	11,740	12,940	14,140	15,340	16,540	17,590
\$260,000 - 279,999	2,040	4,440	6,580	7,980	9,340	10,540	11,740	12,940	14,140	16,100	18,100	19,190
\$280,000 - 299,999	2,040	4,440	6,580	7,980	9,340	10,540	11,740	13,700	15,700	17,700	19,700	20,790
\$300,000 - 319,999	2,040	4,440	6,580	7,980	9,340	11,300	13,300	15,300	17,300	19,300	21,300	22,390
\$320,000 - 364,999	2,100	5,300	8,240	10,440	12,600	14,600	16,600	18,600	20,600	22,600	24,870	26,260
\$365,000 - 524,999	2,970	6,470	9,710	12,210	14,670	16,970	19,270	21,570	23,870	26,170	28,470	29,870
\$525,000 and over	3,140	6,840	10,280	12,980	15,640	18,140	20,640	23,140	25,640	28,140	30,640	32,240
						d Filing S	•		N-1			
Higher Paying Job		Ι.	Ι.					Wage & S		1.	1.	
Annual Taxable Wage & Salary	\$0 - 9,999	\$10,000 - 19,999	\$20,000 - 29,999	\$30,000 - 39,999	\$40,000 - 49,999	\$50,000 - 59,999	\$60,000 - 69,999	\$70,000 - 79,999	\$80,000 - 89,999	\$90,000 - 99,999	\$100,000 - 109,999	\$110,000 - 120,000
\$0 - 9,999	\$400	\$930	\$1,020	\$1,020	\$1,250	\$1,870	\$1,870	\$1,870	\$1,870	\$1,970	\$2,040	\$2,040
\$10,000 - 19,999	930	1,570	1,660	1,890	2,890	3,510	3,510	3,510	3,610	3,810	3,880	3,880
\$20,000 - 29,999	1,020	1,660	1,990	2,990	3,990	4,610	4,610	4,710	4,910	5,110	5,180	5,180
\$30,000 - 39,999	1,020	1,890	2,990	3,990	4,990	5,610	5,710	5,910	6,110	6,310	6,380	6,380
\$40,000 - 59,999	1,870	3,510	4,610	5,610	6,680	7,500	7,700	7,900	8,100	8,300	8,370	8,370
\$60,000 - 79,999	1,870	3,510	4,680	5,880	7,080	7,900	8,100	8,300	8,500	8,700	8,970	9,770
\$80,000 - 99,999	1,940	3,780	5,080	6,280	7,480	8,300	8,500	8,700	9,100	10,100	10,970	11,770
\$100,000 - 124,999	2,040	3,880	5,180	6,380	7,580	8,400	9,140	10,140	11,140	12,140	13,040	14,140
\$125,000 - 149,999	2,040	3,880	5,180	6,520	8,520	10,140	11,140	12,140	13,320	14,620	15,790	16,890
\$150,000 - 174,999	2,040	4,420	6,520	8,520	10,520	12,170	13,470	14,770	16,070	17,370	18,540	19,640
\$175,000 - 199,999	2,720	5,360	7,460	9,630	11,930	13,860	15,160	16,460	17,760	19,060	20,230	21,330
\$200,000 - 249,999 \$250,000 - 399,999	2,970	5,920	8,310	10,610	12,910	14,840	16,140	17,440	18,740	20,040	21,210	22,310
\$400,000 - 449,999	2,970 2,970	5,920 5,920	8,310 8,310	10,610 10,610	12,910 12,910	14,840 14,840	16,140 16,140	17,440 17,440	18,740 18,740	20,040	21,210 21,210	22,310 22,470
\$450,000 and over	3,140	6,290	8,880	11,380	13,880	16,010	17,510	19,010	20,510	22,010	23,380	24,680
ψ100,000 and 0voi	0,140	0,200	0,000			Househo		10,010	20,010	22,010	20,000	21,000
Higher Paying Job								Wage & S	Salary			
Annual Taxable	\$0 -	\$10,000 -	\$20,000 -	\$30,000 -	\$40,000 -	\$50,000 -	\$60,000 -	\$70,000 -	\$80,000 -	\$90,000 -	\$100,000 -	\$110,000 -
Wage & Salary	9,999	19,999	29,999	39,999	49,999	59,999	69,999	79,999	89,999	99,999	109,999	120,000
\$0 - 9,999	\$0	\$760	\$910	\$1,020	\$1,020	\$1,020	\$1,190	\$1,870	\$1,870	\$1,870	\$2,040	\$2,040
\$10,000 - 19,999	760	1,820	2,110	2,220	2,220	2,390	3,390	4,070	4,070	4,240	4,440	4,440
\$20,000 - 29,999	910	2,110	2,400	2,510	2,680	3,680	4,680	5,360	5,530	5,730	5,930	5,930
\$30,000 - 39,999	1,020	2,220	2,510	2,790	3,790	4,790	5,790	6,640	6,840	7,040	7,240	7,240
\$40,000 - 59,999	1,020	2,240	3,530	4,640	5,640	6,780	7,980	8,860	9,060	9,260	9,460	9,460
\$60,000 - 79,999	1,870	4,070	5,360	6,610	7,810	9,010	10,210	11,090	11,290	11,490	11,690	12,170
\$80,000 - 99,999	1,870	4,210	5,700	7,010	8,210	9,410	10,610	11,490	11,690	12,380	13,370	14,170
\$100,000 - 124,999	2,040	4,440	5,930	7,240	8,440	9,640	10,860	12,540	13,540	14,540	15,540	16,480
\$125,000 - 149,999	2,040	4,440	5,930	7,240	8,860	10,860	12,860	14,540	15,540	16,830	18,130	19,230
\$150,000 - 174,999 \$175,000 - 100,000	2,040	4,460	6,750	8,860	10,860	12,860	15,000	16,980	18,280	19,580	20,880	21,980
\$175,000 - 199,999 \$200,000 - 440,000	2,720	5,920	8,210	10,320	12,600	14,900	17,200	19,180	20,480	21,780	23,080	24,180
\$200,000 - 449,999 \$450,000 and over	2,970	6,470	9,060	11,480	13,780	16,080	18,380	20,360	21,660	22,960	24,250	25,360
\$450,000 and over	3,140	6,840	9,630	12,250	14,750	17,250	19,750	21,930	23,430	24,930	26,420	27,730



AUT	HORIZATION AGREEMENT FO	R AUTOMATIC	DEPOSITS
I Accept Direct D	<u>eposit</u>		
(Must Complete All Ir	nformation Below)		
COMPANY NAME:	Metropolitan State University of Denver	COMPANY ID NUMBER:	84-0559160
entries and adjustments	Denver, hereinafter called COMPANY, to is for any credit entries in error to my () Choelow, hereinafter called DEPOSITORY, to c	ecking () Savings acc	count (select one) indicated below at
BANK DEPOSITORY NAME:			
ROUTING NUMBER	A	CCOUNT NUMBER	
	remain in full force and effect until COMPA e and such manner as to afford COMPANY		
NAME		00 Number	
	(PLEASE PRINT)		
Work Telephone Numbe	r: Home/Ce Number:	Il Telephone	
DATE	SIGNED		
	N CREDIT AUTHORIZATIONS SHOU DRIZATION ONLY BY NOTIFYING TH UTHORIZATION.		
Void	ATTACI ed Personal Check or Banl HERE	_	onal Letter
I Decline Direct I Paycheck available for pic Office – Student Success B	kup in the Cashiers	Print Name	900 #

REQUIRED: PLEASE INCLUDE WITH THE PACKET!

CLASS SCHEDULE:

- STUDENT DETAIL SCHEDULE FROM STUDENT HUB OR
- SFAREGS/SFARGSQ BANNER PRINTOUT



AND IF APPLICABLE

WORK-STUDY AWARD:

- AWARD HISTORY FROM STUDENT HUB OR
- AID BY YEAR-OVERVIEW TAB FROM STUDENT HUB OR
- RPAAWRD BANNER PRINTOUT





International Students and Social Security Numbers

Are you temporarily in the United States to attend a college, language, vocational, or nonacademic school with a nonimmigrant F-1, M-1, or J-1 student classification? Your school may ask you for your Social Security number. Some colleges and schools use Social Security numbers as student identification numbers. If you don't have a Social Security number, the college or school should be able to give you another identification number.

Social Security numbers generally are assigned to people who are authorized to work in the United States. Social Security numbers are used to report your wages to the government and to determine eligibility for Social Security benefits. Social Security will not assign a number to you just to enroll in a college or school.

If you want to get a job on campus, you should contact your designated school official for international students. This official can tell you if you're eligible to work on campus and can give you information about available jobs. Also, your school may approve certain limited off-campus employment, as permitted under Department of Homeland Security (DHS) regulations. **If your** school has authorized you to work either on or off campus, and you meet Social Security's eligibility requirements described in the next section, you can get a Social Security number.

In general, only noncitizens who have DHS' permission to work can apply for a Social Security number. We suggest you wait 48 hours after reporting to your school before you apply for a Social Security number. This waiting will help ensure we can verify your immigration status with the DHS.

To apply for a Social Security number at your local Social Security office:

- Complete an Application for a Social Security card (SS-5); and
- Show us documents proving your:

- —Work-authorized immigration status;
- —Age; and
- -Identity.

Immigration status

To prove your immigration status, you must show us a current admission stamp in your unexpired foreign passport and Arrival/ Departure Record (Form I-94), if available. If you're an F-1 or M-1 student, you must also show us your Certificate of Eligibility for Nonimmigrant Student Status (Form I-20). If you're a J-1 exchange visitor, you must show us your Certificate of Eligibility for Exchange Visitor Status (Form DS-2019).

Work eligibility

If vou're an F-1 student and eligible to work on campus, you must provide a letter from your designated school official that:

- Identifies you;
- Confirms your current school status; and
- Identifies your employer and the type of work you are, or will be, doing.

We also need to see evidence of that employment, such as a recent pay slip or a letter from your employer. Your supervisor must sign and date the employment letter. This letter must describe:

- Your job;
- Your employment start date;
- The number of hours you are, or will be, working; and
- Your supervisor's name and telephone number.

If you're an F-1 student authorized to work in curricular practical training (CPT), you must provide us your Form I-20 with the employment page completed and signed by your school's designated official.

If you're an F-1 or M-1 student and have a work permit (Form I-766) from the DHS, you must present it.

If you're a J-1 student, student intern, or international visitor, you must provide a letter from your sponsor. The letter should be on sponsor letterhead with an original signature that authorizes your employment.

We cannot process your application if:

- Your on-campus or CPT work begins more than 30 days from your application date; or
- The employment start date on your work permit from the DHS (Form I-766) is a future date.

Age

You must present your foreign birth certificate if you have it or can get it within 10 business days. If you can't present your foreign birth certificate, we can consider other documents, such as your passport or a document issued by the DHS, as evidence of your age.

Identity

We can only accept certain documents as proof of identity. An acceptable document must be current (not expired) and show your name, identifying information, and preferably, a recent photograph. Social Security will ask to see your current unexpired foreign passport with DHS issued immigration documents.

All documents must be either originals or copies certified by the issuing agency. We cannot accept photocopies or notarized copies of documents. We also cannot accept a receipt showing you applied for the document. We may use one document for two purposes. For example, we may use your admission stamp in the unexpired foreign passport as proof of both work eligibility and identity.

We don't require you to have a Social Security number before you start work. However, the Internal Revenue Service (IRS) requires employers to report wages using a Social Security number. While you wait for your Social Security number, your employer can use a letter from us stating that you applied for a number. Your employer may use your immigration documents as proof of your authorization to work in the United States. Employers can find more information on the Internet at www.socialsecurity.gov/employer/hiring.htm.

Contacting Social Security

The most convenient way to contact us anytime, anywhere is to visit *www.socialsecurity.gov*. There, you can: apply for benefits; open a *my* Social Security account, which you can use to review your *Social Security Statement*, verify your earnings, print a benefit verification letter, change your direct deposit information, request a replacement Medicare card, and get a replacement SSA-1099/1042S; obtain valuable information; find publications; get answers to frequently asked questions; and much more.

If you don't have access to the internet, we offer many automated services by telephone, 24 hours a day, 7 days a week. Call us toll-free at 1-800-772-1213 or at our TTY number, 1-800-325-0778, if you're deaf or hard of hearing.

If you need to speak to a person, we can answer your calls from 7 a.m. to 7 p.m., Monday through Friday. We ask for your patience during busy periods since you may experience a higher than usual rate of busy signals and longer hold times to speak to us. We look forward to serving you.

