Checklist for Student Employee Supervisors

GETTING STARTED:

1) **Go to the "Student Employment Portal"** (https://www.msudenver.edu/se/) and click on the **"Getting Started"** link.

2) **Complete** the **Supervisor Packet** –
   a) Please complete the following on the **Student Employment Form**
      - Enrollment Information
      - Supervisor/Department Information
      - Start & End Dates - NOTE: Students are not allowed to work until authorized by HR
      - Payment Information
         o FOAP
         o Rate of Pay including Level and Step
      - Sign and obtain the students signature and other necessary signatures

   b) Please complete all sections and obtain the student's signature on the **Position Description** form

HOW TO SUBMIT THE PACKET:

1) **Submit** by using the Student Employment Liquid Files Drop Box Link - https://secureshare.msudenver.edu/filedrop/StudentEmploymentDropbox

STUDENT EMPLOYEE'S NEXT STEPS:

1) Please have your new student employee *register for a background check* on the Student Employment Portal's event calendar - https://www.msudenver.edu/se/calendar/
2) **Direct** them to the **New Employee Packet** under the SE portal's **Getting Started** Section.
   a) There is a checklist in the packet for them to follow.

AUTHORIZATION TO WORK:

1) You and your new student employee will receive a confirmation email with their eligible start date. This will occur after we have received both completed packets, the background check has been cleared, the I-9 is done and we've successfully completed their set up in Banner.
2) On the new employees first day of work
   a) Please have them watch the 3 videos covering online timesheets, paper timesheets and the handbook.
   b) Please have them complete the brief quiz.

❖ **STUDENT EMPLOYMENT PORTAL (SE Portal) - https://msudenver.edu/se/**

❖ *CONTACT US AT: studentemployment@msudenver.edu or 303-615-0999 (HR main line)*

Metropolitan State University of Denver
Student Employment Form (SEF)

USE OF THIS FORM: This appointment must comply with MSU Denver's student employment policies. All student employment forms are available on the HR Website. This form must always be accompanied by a class registration and work-study award if applicable. **All required forms must be completed prior to the students' start date.**

I. TYPE OF EMPLOYMENT (Indicate all that apply- One form may be used to set up two jobs at the beginning of the semester, i.e. Hourly and Work-Study. Indicate the two desired jobs in this section and the 2 FOAPs in Section IV; the percentage would be 100% for both positions.)

- ☐ On-Campus Employment
- ☐ Off-Campus Employment
- ☐ Work Study
- ☐ Hourly/ Institutional Funds
- ☐ SGA
- ☐ Grant/Foundation Funded

II. EMPLOYEE INFORMATION

Employee Name: _____   Employee 900#: _____
(Last, First, Middle Initial)

Student Email Address: _____

Enrollment Status	Enrolled at :	Is this the last semester before graduation?
☐ 6 or more credits ☐ Less than 6 credits ☐ Student graduated ☐ Graduate Program Student	☐ MSU ☐ UCD ☐ CCD ☐ Other _____	☐ Yes ☐ No ☐ Not sure.

III. JOB/ POSITION DATA (Indicate all that may apply; also attach a Student Position Description Form, for all new employees, transfers & level increases)

A. Action

- ☐ New Hire
- ☐ Continuing Employee/Rehire
- ☐ Split Assignment
- ☐ FOAP: Change
- ☐ Pay Increase
- ☐ Job Transfer/New Department
- ☐ Supervisor Change

B. Job Information/ Compensation

Effective Date: _____   End Date: _____   Department: _____

Supervisor Name: _____   Phone Number: _____   Campus Box: _____

Rate of Pay: $ _____   Job Level: _____   Earnings Limit: $ _____

IV. FUNDING (FOAP)   WORK STUDY FUNDS: CWS: 401502   FWS: 400152   NNWS: 401533

1st ON-CAMPUS FOAP	2nd ON-CAMPUS FOAP
Fund: _____	Fund: _____
ORG: _____	ORG: _____
Account: _____	Account: _____
Program: _____	Program: _____
Activity code: _____	Activity code: _____
Percent: ____ %	Percent: ____ %

FUNDING FOR OFF CAMPUS AGENCIES ONLY
Insert Assigned Agency # in the Gray Box Below

Fund	ORG	Account	Program	% of charged earnings.
400152	SFIN2	6191	1300	75% = FWS
	SFIN2	6197	1300	25% = Agency

For work-study funding split with grant funding, please use the FOAP Boxes to the left. ⇐

Grant/Foundation Approval

Date: _____

V. SIGNATURES

Signature of Student: _____   Date: _____

> ***This employment contract is subject to termination by either party at any time and the employee shall be deemed at will. I hereby certify that I am a registered student and understand I am subject to immediate termination when I graduate or cease to be a registered student. *****

Signature of Supervisor: _____   Date: _____

Account Custodian Signature: _____   Date: _____

Level V– VP Signature: _____   Date: _____

FOR HUMAN RESOURCE USE ONLY				
☐ Background Authorization	**HR Forms**	**Payroll Forms**	**Registration**	**Work-Study Award**	**Banner Input**
Date Received By HR	☐ I-9 E-Form / ID:	☐ W-4	☐ Credits -	☐ CWS	☐ PPAIDEN
	☐ Data Sheet	☐ Direct Deposit	Term -	☐ FWS	☐ PEAEMPL
	☐ Position Description	☐ PERA		☐ NNWS	☐ WEBTIME
	☐ Worker's Compensation	**International Students**	**Level 1 & 2 Increases**	**Level 3, 4 & 5 Increase**	☐ WKS
	☐ Confidentiality/Handbook	☐ EEIS Form	☐ Evaluation	☐ Evaluation	☐ HRL
	☐ SSA 1945 Form	☐ Foreign National Form	☐ Schedule/Award	☐ Position Description	☐ INT
	☐ Disability Disclosure	**Summer Hourly – Below 6 Credits**		☐ Letter Justification	☐ OFF
	☐ PRWORA	☐ Enroll in TIAA (Spreadsheet)	Processed By:		Rep/Date

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The purpose of this form is to ensure that there are no arbitrary pay rates. Student employees must be paid within the same pay level if they are performing the same duties with the same complexity. This ensures equality in the workplace and justifies the level in which a student is hired. Departments must keep a record of all work study job descriptions to comply with federal regulations and to continue to receive annual funding.

Section I

Student Name: _____ 900# _____

Department: _____ ORG: _____ Campus Box: _____

Phone Number: _____ Fax Number: _____

Section II

Student Position Title: _____

Position Reports To: _____ Title: _____
(Print Name)

Supervisor email: _____ Employment Begin Date: _____

Level: _____ Starting Rate of Pay: $ _____ Estimated hours per week: _____

General Position Statements:

Section III

Duties and Responsibilities: (List duties according to percentage of time spent on each duty)

1. _____ % _____
2. _____ % _____
3. _____ % _____
4. _____ % _____
5. _____ %

Complexity of Skills and Abilities: (Check those that Apply)

Office work:
- ☐ Answering Telephones
- ☐ Operating the Copier Machine
- ☐ Filing
- ☐ Mail Merge
- ☐ Typing (Forms, letters, etc.)
- ☐ Data Verification
- ☐ Reception Duties
- ☐ Process Forms

Computer Skills:
- ☐ PC
- ☐ Macintosh
- ☐ Use MS Word
- ☐ Use MS Excel

- ☐ Use MS Publisher
- ☐ Use MS Access
- ☐ Use MS Front Page
- ☐ Use MS Power Point
- ☐ Create Spreadsheets
- ☐ Use Spreadsheets
- ☐ Data Entry
- ☐ Create Databases
- ☐ Create Forms
- ☐ Installing software
- ☐ Installing hardware
- ☐ Troubleshooting
- ☐ Formatting Disks
- ☐ PDF Maker

- ☐ Use Dreamweaver
- ☐ Flash Web Design
- ☐ HTML writing and editing
- ☐ Web Page Design
- ☐ Use Graphics and Photo Programs

Miscellaneous:
- ☐ Works with Special Need Individuals
- ☐ Tutoring/ Mentoring
- ☐ Works with Children
- ☐ Fluency in another language
- ☐ Customer Service Skills
- ☐ Operating a Cash Register
- ☐ Keep records and logs
- ☐ Use Banner

I have read and fully understand the responsibilities and duties required in this position

Student Signature: _____ Date: _____

Supervisor Signature: _____ Date: _____

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