

Hourly Student Worker Acknowledgment Form

August 2020

Student Employee (Section I):		
Student Name	lent NameStudent ID #	
Are you related by blood or marriage, to	any member of the Board of Regents, Te	exas State University System?
☐ Yes ☐ No		
Do you have relatives, by blood or marri	iage employed at this institution? \square Yes	□ No
If yes, give:		
Name	Department	Relationship
Name	Department	Relationship
Student Employee Acknowledgement	(Section II):	
Are you working somewhere else on campus	? Yes No	
If yes: Fill in start date, department, sup	pervisor name and contact information, numb	per of hours you are working.
☐ Active wartime or campaig☐ Recently separated veterar☐ Armed forces service meda☐ Disabled veteran	n date of discharge:al veteran ut choose not to self-identify the classificatio	n to which I belong.
l acknowledge that I have been informed https://www.hr.txstate.edu/New-Employresponsible for reading all the information comply with all Texas State University promy responsibility to promptly complete all Human Resources will provide me with as	ree-Welcome/Get-Started/notices.html. In on these sites within the first 30 days of ocedures, policies, and conditions of empired return forms to my supervisor. I under	I understand that I am funderstand that I am funderstand that I and agree to loyment. I also agree that it is rstand that my department or
*Student Signature	Date:	
Employer Section:		
Signature of Account Manager/Auto Kim Dunbar Authorized Account Manager/Authorized Rep (please print)	Mathematics	Date 512.245.2551 Phone

Important Notice: Laws, policies, rules, and regulations relating to the above items change periodically; before taking actions based on information contained in your packet, please check first with your supervisor.