

Authorization Form to Hire a Pitzer Student Employee (Non-Work Study)

(Non-Work Study Only)

This form must be completed by the student and the supervisor and signed by the supervisor and the Area Vice President

Student Information | To be Completed By Student

Name: _____ Preferred Name: _____
Student ID #: _____ Mailbox Number: _____
Phone: _____ Student Email: _____
Type of Hire: New Hire (First Pitzer Job) Re-Hire* (Additional Pitzer Job)

Position Information | To be Completed By Supervisor

Position: _____ Department: _____
Work Location: _____ Timesheet Approver: _____
Start Date: _____ End Date: _____
Hourly Rate: _____ Hours Per Week*: _____ Total Estimated Expenditure: _____
Cost Center: _____ Function: _____ Fund: _____ Spend: _____

***Benefits Eligibility:** Student Employees become eligible for medical insurance benefits only IF they work at least 30 hours per week in a 12 month Measurement Period as defined by the Affordable Health Care Act. If so, they are then eligible on the first of the month 60 days after said Measurement Period. The initial Measurement Period starts on the first of the month following the date of hire and runs for a period of 12 months. Thereafter the ongoing Measurement Period will be from October 4 to October 3.

***Re-Hires:** Individuals rehired within 4 weeks of their previous termination date will resume benefits eligibility IF they were eligible at the time of their termination. If rehired later than 4 weeks but less than 26 weeks after their termination, they will resume benefits eligibility IF they were eligible at the time of their termination AND their period of employment was greater than the break in service.

Budget Expenditure Authorization | To be Completed By Supervisor and Area Vice President

Supervisor: _____ Date: _____
Area Vice President: _____ Date: _____

Submit Completed form to Human Resources for Processing

FOR HR OFFICE USE ONLY

Processed By: _____ Initials: _____ Date: _____ Checked by Payroll: _____