

**HOOD COLLEGE**

**TEMPORARY EMPLOYMENT AGREEMENT FORM for YEAR \_\_\_\_\_**

\_\_\_\_\_ **SPRING** \_\_\_\_\_ **SUMMER** \_\_\_\_\_ **FALL** \_\_\_\_\_ **ACADEMIC YEAR**

This form is used by the temporary employee and the College for planning purposes. It does not alter the at-will employment relationship between the College and the employee.

Are you employed in another position on Campus? Yes No \*\*If yes, how many hours per week? \_\_\_\_\_

**Please Note:** Students should avoid working more than 11 hours per week in one job or across multiple positions.

Name: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Email: \_\_\_\_\_ Phone #: \_\_\_\_\_

Social Security Last 4 Digits: XXX-XX-\_\_\_\_\_ Date of Birth: \_\_\_\_\_

Emergency Contact Name: \_\_\_\_\_ Contact #: \_\_\_\_\_

Current Hood Student: Yes \_\_\_ No \_\_\_ Previous employment with the College: Yes \_\_\_ No \_\_\_

**Hiring Agreement -- To be completed by Supervisor**

\_\_\_\_\_ Employed by \_\_\_\_\_  
Employee Name Department Name

Job Title: \_\_\_\_\_ Supervisor: \_\_\_\_\_

Start Date: \_\_\_\_\_ Expected End Date: \_\_\_\_\_

Hourly Pay Rate: \$ \_\_\_\_\_ Stipend: Yes \_\_\_ No \_\_\_ Budget Acct #: \_\_\_\_\_ - \_\_\_\_\_ -6170-1

Hours per week: \_\_\_\_\_ Total Approved \$: \_\_\_\_\_

New hires not previously employed by the College will receive a Human Resources email with an on-boarding link to new hire paperwork. Forms must be completed three days in advance of their start date. As required by the Immigration Reform Control Act, they also must appear **in person** to the HR Department with appropriate documentation to complete the Employment Eligibility Verification Form (I-9) within three (3) business days of their start date. Failure to comply will result in termination of their employment.

Signature of Employee \_\_\_\_\_ Date \_\_\_\_\_

Signature of Supervisor \_\_\_\_\_ Date \_\_\_\_\_

Signature of VP/President \_\_\_\_\_ Date \_\_\_\_\_

**Please make a copy for your records**

Human Resources Authorization \_\_\_\_\_ Date \_\_\_\_\_

**HR Use Only:** Job # \_\_\_\_\_ Employee ID# \_\_\_\_\_ Date Entered in System \_\_\_\_\_