

# **International Student Employment Packet**

Check the box if you have accepted an offer of employment at CC \* This packet cannot be accepted or processed before an offer has been accepted

Student ID:	
Student Name:	
First Working Day (Estimate):	
Job Title:	
Supervisor Name/Department:	
Program End Date: (Located on your Form I-20)	

Date Submitted:	

Students must return to the Office of Financial Aid & Student Employment with their Social Security card if not previously provided.

All international students must contact the Tax & Compliance Manager within one week of starting their employment. Tax.compliance@coloradocollege.edu

\*NO PAYMENTS will be processed for work until taxes are set up.

Contact International Student & Scholar Services (ISSS) at <u>isss@coloradocollege.edu</u> for questions about employment, your immigration status, and applying for a social security number.

Notice: This organization participates in E-Verify. For more information, please visit https://www.e-verify.gov/



## **Employment Eligibility Verification**

**Department of Homeland Security** U.S. Citizenship and Immigration Services

## START HERE: Employers must ensure the form instructions are available to employees when completing this form. Employers are liable for failing to comply with the requirements for completing this form. See below and the <u>Instructions</u>.

**ANTI-DISCRIMINATION NOTICE:** All employees can choose which acceptable documentation to present for Form I-9. Employers cannot ask employees for documentation to verify information in **Section 1**, or specify which acceptable documentation employees must present for **Section 2** or Supplement B, Reverification and Rehire. Treating employees differently based on their citizenship, immigration status, or national origin may be illegal.

Section 1. Employee I day of employment, b						yees I	must comp	lete and si	gn Sect	ion 1 of Fo	orm I-9 r	no late	er than the <b>first</b>
Last Name (Family Name)			First Na	ime (Give	n Nam	ne)		Middle Initia	al (if any)	Other Last	Names Us	sed (if a	ny)
Address (Street Number and	d Name)			Apt. Nu	mber	(if any)	City or Town	ı		<u> </u>	State		ZIP Code
Date of Birth (mm/dd/yyyy)	U.S. So	cial Sec	Security Number Employee's Email Address						Employee	e's Tele	phone Number		
Section 2. Employer F	nent and/or hts, or the s, in mpletion of er penalty ormation, of the box ship or rue and anslator assis	If you U U	Check one of the following boxes to attest to your citizenship or immigration status (See page 2 and 3 of the instructions)         1. A citizen of the United States         2. A noncitizen national of the United States (See Instructions.)         3. A lawful permanent resident (Enter USCIS or A-Number.)         4. A noncitizen (other than Item Numbers 2. and 3. above) authorized to work until (exp. date, if any)         f you check Item Number 4., enter one of these:         USCIS A-Number       OR         Form I-94 Admission Number       OR         Today's Date (mm/dd/yyyy)         I you in completing Section 1, that person MUST complete the Preparer and/or Translator Certification on Page         Verification: Employers or their authorized representative must complete and sign Section 2 within the section 2 within 1 wit						y) ountry of Issuance tion on Page 3. 2 within three				
business days after the er authorized by the Secreta documentation in the Addi	nployee's firs ry of DHS, de	st day c ocumer	of employ ntation fr	yment, ai om List /	nd mu A OR	ust phy a com	sically exam bination of d	ine, or exar ocumentati	nine con: on from L	sistent with ist B and L	an altern .ist C. En	native p nter any	procedure y additional
		List	Α		OR		Lis	st B		AND		List	С
Document Title 1													
Issuing Authority													
Document Number (if any)													
Expiration Date (if any)													
Document Title 2 (if any)					Ac	dition	al Informati	on					
Issuing Authority													
Document Number (if any)													
Expiration Date (if any)													
Document Title 3 (if any)													
Issuing Authority													
Document Number (if any)													
Expiration Date (if any)						Check	here if you us	ed an alterna	tive proce	dure authori	<u> </u>		amine documents.
Certification: I attest, under employee, (2) the above-list best of my knowledge, the e	ed document	ation ap	pears to	be genui	ne an	d to rel	ate to the em				First Da (mm/dd		nployment
Last Name, First Name and T	itle of Employe	er or Aut	horized R	tepresenta	ative	Si	ignature of Err	ployer or Aut	horized R	epresentativ	e	Today	's Date (mm/dd/yyyy)
Employer's Business or Organ	nization Name			Em	oloyer	's Busin	ess or Organi	zation Addres	s, City or	Town, State,	ZIP Code	2	

## LISTS OF ACCEPTABLE DOCUMENTS

All documents containing an expiration date must be unexpired.

\* Documents extended by the issuing authority are considered unexpired.

Employees may present one selection from List A or a

combination of one selection from List B and one selection from List C.

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

LIST A Documents that Establish Both Identity		LIST B	LIST C Documents that Establish Employment
and Employment Authorization	OR	Documents that Establish Identity Al	ND Authorization
1. U.S. Passport or U.S. Passport Card	_	<ol> <li>Driver's license or ID card issued by a State or outlying possession of the United States</li> </ol>	<ol> <li>A Social Security Account Number card, unless the card includes one of the following restrictions:</li> </ol>
2. Permanent Resident Card or Alien Registration Receipt Card (Form I-551)		provided it contains a photograph or information such as name, date of birth, gender, height, eye color, and address	(1) NOT VALID FOR EMPLOYMENT
<ol> <li>Foreign passport that contains a temporary I-551 stamp or temporary I-551 printed notation on a machine- temporary instance.</li> </ol>		<ol> <li>ID card issued by federal, state or local government agencies or entities, provided it</li> </ol>	<ul><li>(2) VALID FOR WORK ONLY WITH INS AUTHORIZATION</li><li>(3) VALID FOR WORK ONLY WITH</li></ul>
<ul><li>readable immigrant visa</li><li>4. Employment Authorization Document that contains a photograph (Form I-766)</li></ul>	-	contains a photograph or information such as name, date of birth, gender, height, eye color, and address	DHS AUTHORIZATION
5. For an individual temporarily authorized		3. School ID card with a photograph	Department of State (Forms DS-1350, FS-545, FS-240)
to work for a specific employer because of his or her status or parole:		4. Voter's registration card	<b>3.</b> Original or certified copy of birth certificate
a. Foreign passport; and		5. U.S. Military card or draft record	issued by a State, county, municipal authority, or territory of the United States
b. Form I-94 or Form I-94A that has the following:		6. Military dependent's ID card	bearing an official seal
(1) The same name as the		7. U.S. Coast Guard Merchant Mariner Card	4. Native American tribal document
passport; and (2) An endorsement of the		8. Native American tribal document	<ul> <li>5. U.S. Citizen ID Card (Form I-197)</li> <li>6. Identification Card for Use of Resident</li> </ul>
individual's status or parole as long as that period of		<ol> <li>Driver's license issued by a Canadian government authority</li> </ol>	Citizen in the United States (Form I-179)
endorsement has not yet expired and the proposed employment is not in conflict with any restrictions or		For persons under age 18 who are unable to present a document listed above:	7. Employment authorization document issued by the Department of Homeland Security
limitations identified on the form.	-	<b>10.</b> School record or report card	For examples, see <u>Section 7</u> and <u>Section 13</u> of the M-274 on
<ol> <li>Passport from the Federated States of Micronesia (FSM) or the Republic of the</li> </ol>		<b>11.</b> Clinic, doctor, or hospital record	<u>uscis.gov/i-9-central</u> . The Form I-766, Employment
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		<b>12.</b> Day-care or nursery school record	Authorization Document, is a List A, <b>Item</b> <b>Number 4.</b> document, not a List C document.
	1	Acceptable Receipts	
May be prese		l in lieu of a document listed above for a For receipt validity dates, see the M-274.	
<ul> <li>Receipt for a replacement of a lost, stolen, or damaged List A document.</li> </ul>	OR	Receipt for a replacement of a lost, stolen, or damaged List B document.	Receipt for a replacement of a lost, stolen, or damaged List C document.
<ul> <li>Form I-94 issued to a lawful permanent resident that contains an I-551 stamp and a photograph of the individual.</li> </ul>			
<ul> <li>Form I-94 with "RE" notation or refugee stamp issued to a refugee.</li> </ul>			

\*Refer to the Employment Authorization Extensions page on <u>I-9 Central</u> for more information.



### Supplement A, Preparer and/or Translator Certification for Section 1

**Department of Homeland Security** 

U.S. Citizenship and Immigration Services

USCIS Form I-9 Supplement A OMB No. 1615-0047 Expires 07/31/2026

Last Name (Family Name) from Section 1.	First Name (Given Name) from Section 1.	Middle initial (if any) from Section 1.

**Instructions:** This supplement must be completed by any preparer and/or translator who assists an employee in completing Section 1 of Form I-9. The preparer and/or translator must enter the employee's name in the spaces provided above. Each preparer or translator must complete, sign, and date a separate certification area. Employers must retain completed supplement sheets with the employee's completed Form I-9.

# I attest, under penalty of perjury, that I have assisted in the completion of Section 1 of this form and that to the best of my knowledge the information is true and correct.

Signature of Preparer or Translator			Date (mn	n/dd/yyyy)	
Last Name <i>(Family Name)</i>	First I	Name <i>(Given Name)</i>			Middle Initial <i>(if any)</i>
Address (Street Number and Name)		City or Town		State	ZIP Code

## I attest, under penalty of perjury, that I have assisted in the completion of Section 1 of this form and that to the best of my knowledge the information is true and correct.

Signature of Preparer or Translator				/dd/yyyy)	
Last Name (Family Name)	First I	Name <i>(Given Name)</i>	-		Middle Initial (if any)
Address (Street Number and Name)		City or Town		State	ZIP Code

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Signature of Preparer or Translator			Date (mm	/dd/yyyy)	
Last Name (Family Name)	First I	Name <i>(Given Name)</i>			Middle Initial <i>(if any)</i>
Address (Street Number and Name)	1	City or Town		State	ZIP Code

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Signature of Preparer or Translator			Date (mn	n/dd/yyyy)	
Last Name ( <i>Family Name</i> )	First I	Name <i>(Given Name)</i>			Middle Initial <i>(if any)</i>
Address (Street Number and Name)		City or Town		State	ZIP Code



# **Direct Deposit Authorization Form**

Student-CC ID # :	Student Name:

\*Note: This is not debit or credit card information. Please contact your bank for the information below if unknown or refer to a personal check.

Financial Institution: (Name of Bank)					
		□ Checking □ Saving			
Routing # (9 digits)	Account #				

 Enroll in Direct Deposit
 _Replace Current Account
 <b>_Cancel</b> my existing Direct Deposit ( <u>close account</u> )

Please include an e-mail address for the direct deposit advice to be e-mailed:



## Student Employment (International Students) Important Next-Steps

### **International Student Worker Requirements:**

### Tax & Compliance:

- 1.) You have **7 days from your first day of work** to contact Colorado College Tax & Compliance about setting up your payroll taxes: <u>Tax.Compliance@coloradocollege.edu</u>.
- 2.) You will NOT BE PAID until your taxes have been set up with tax & compliance.

### **Social Security Appointment:**

- You have 30 days from your date of hire to make an appointment with the US Social Security Office to acquire a Social Security Number. See the ISSS webpage for instructions to get started here: https://www.coloradocollege.edu/offices/globalandfieldstudy/internationalstudents/current-students/employment/social-security-number.html. If you do not make an appointment in a timely manner, your job(s) will be TERMINATED.
- Once you receive your Social Security Card in the mail, you must bring it to the Financial Aid & Student Employment Office for our records. If you do not do so in a timely manner, your job(s) will be TERMINATED.

### Work Hour Limits:

- 1.) International students are only permitted to work up to 20 hours per week while school is in session.
- 2.) The 20-hour per week limit applies to the TOTAL number of hours worked in a single workweek among all on-campus jobs.
- 3.) Full-time (more than 20 hours per week) are allowed only during official school breaks: fall break, winter break, spring break, and summer break.

\*Note: Block breaks are NOT considered official school breaks.

### **Program End Date:**

- 1.) If you are going to graduate earlier than the Program End Date on your I-20, notify our office immediately as this could have implications on your ability to work as a student employee.
- 2.) Once you have completed your academic degree you are no longer eligible to work as a student employee.

Contact International Student & Scholar Services (ISSS) at <u>isss@coloradocollege.edu</u> for questions about employment and your immigration status.



### You CANNOT begin work the same day you turn in your employment packet.

If you complete any work or training hours **before** you can see your timesheet on Banner SSB, you will be **SUSPENDED from student employment** for one academic semester.

1.) The Student Employment Office must process your paperwork, which includes running your I-9 documents through the US government. This can take **SEVERAL DAYS.** 

To monitor the status of your paperwork, you can check the "student I-9" lookup tool in your Banner SSB. If it has been **more than 5 business days** since your appointment and your status is still "NOT okay to hire" you can email <u>StudentEmployment@coloradocollege.edu</u> to check-in on the status.

- 2.) Once your paperwork is processed and your status is "Okay to Hire" your supervisor must submit a hiring form to us called an EPAF. Once submitted, it may take 1-3 business days for us to approve it.
- 3.) After the supervisor's EPAF has been approved, your timesheet is created. You now should be able to view it in Banner SSB (you'll have a new tab labeled "Employee"). Once you can see and open it, you are ready to work!

Getting an error when you click on your timesheet? Please let us know right away by emailing <u>StudentEmployment@coloradocollege.edu</u>.

#### Timesheets:

- 1.) Timesheets are **NOT** accessible between the approval deadline and payday. You will be unable to make changes during this time.
- 2.) If you do not submit your timesheet by each deadline, you will **NOT be paid on time**.
- 3.) If your supervisor does not approve your timesheet by the deadline, you will **NOT be paid on time**.
- 4.) If you submit late or inaccurate timesheets more than twice you may be **suspended from student employment**.

#### **Resources:**

Student Employment Handbook, instructions for completing timesheets, payroll calendar/deadlines, and other helpful resources are always available for students online:

https://www.coloradocollege.edu/admission/financialaid/studentemployment/student-toolkit.html

#### Eligibility:

- 1.) You must be enrolled at least Part-Time (2 or more blocks per fall & spring semester) to remain eligible for student employment. To work in the summer, you must be enrolled at least Part-Time during the spring semester preceding OR the fall semester following summer.
- 2.) The term in which you graduate, your last day of work eligibility is the LAST DAY of Block 8. You CANNOT work the summer after graduation or a single day past this date.