

STUDENT EMPLOYEE NEW HIRE PAPERWORK

NEW HIRE PACKET: This checklist identifies new hire forms for student employees. Although the number of forms may seem lengthy, each form is necessary for the college to comply with various State and Federal statutes.

Please note:

- Statutory obligations require you to complete some forms and processes within very explicit timelines and to present identification verifying who you are. To assist you with fulfilling this obligation, we've identified when each document is due and by when.
- Forms marked with an asterisk (*) are required for all student workers. These forms must be completed by yourself and where applicable, your immediate supervisor, and personally hand delivered to Human Resources prior to your first day of work. Forms without an asterisk (*) vary according to the individual's preference.
- All presented documents must be originals. Photocopies are not acceptable.

	FORM TITLE	RETURN TO	DUE	
Re	equired for Employment		11.	
12000	Request for Federal Work Study	Erika Fuentes, Financial Aide	Prior to First Da	
	Student Hiring Form (complete Section 1; supervisor completes Section 2)	Human Resources	Prior to First Day Prior to First Day Prior to First Day Prior to First Day	
	Student Application Form	Human Resources		
	Form W4	Human Resources		
	Emergency Contact Form	Human Resources		
	Employment Eligibility Verification	Human Resources	Prior to but not more than three business days cemployment*	
		TO BE THE STATE OF	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	
ase	ed on individuaj's choice (not mandatory)			
	Direct Deposit Authorization Agreement with supporting documents	Human Resources	Prior to First Da	

As part of your employment processing, you are <u>required</u> to present certain identifying documents before your assignment can be considered complete. The Human Resource department will make a photocopy of the documents you present.

This sheet has been prepared to help you understand the document presentation requirements and what is needed by when. If you do not have a required document, you must present proof you have applied for the document within ten (10) days of your start date. You must then present the document upon its receipt.

■ FORM W-4 (EMPLOYER'S WITHHOLDING ALLOWANCE CERTIFICATE)

Union County College is required to accurately report earnings for employees to the federal government. This requirement means that your name and Social Security Number (SSN) must match information on file with the Social Security Administration and signed by you. The card cannot have the phrase "not valid for employment purposes," cannot be laminated, and cannot be a plastic or metal replica. If your Social Security card has been lost or destroyed, you can easily obtain another card from the Social Security Administration. This process usually takes about ten days from the date you apply for it.

■ EMPLOYMENT ELIGIBILITY VERIFICATION (I-9)

<u>Proof of Identity and Employment Authorization:</u> Confirm you have the appropriate proof of identity as required by the **Employment Eligibility and Verification** (Form I-9) to show Human Resources within three days of your start date.

The Immigration Reform and Control Act (IRCA) of November 1986 requires we certify that you provide certain documents to us that demonstrate you are eligible to accept the employment offer made to you. This requirement is fulfilled when you present documents listed in either Column A or Column B and C of the attached List of Acceptable Documents (attached).



STUDENT EMPLOYMENT HIRING FORM

GRANT APPROVAL STAMP

DATATEL INPUT STAMP	I
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Revised: May 2021 for FY 2021 thru 2022

Instructions: Students who wish to request a Federal Work Study (FWS) award must have a completed FAFSA on file!

FIRST TIME STUDENTS:

Human Resources Approval:

All first time student workers must complete the entire packet: FWS Checklist, Student Hiring Form (Section 1), Student Application, 2021-W4, Emergency Contact Information Sheet, Form I-9 and Direct Deposit Form (which must have a preprinted voided check or bank authorization letter). The Financial Aid Office will approve student's eligibility for Federal Work Study and make the appropriate award (if applicable).

Student must present all forms and identification to Human Resources to complete the hiring process. RETURNING STUDENTS: All students retuning within the same calendar year must complete the Student Hiring Form only.

Students retuning outside the calendar year **must** complete the Student Hiring Form **and** a new (current year) W-4.

		<u> – Student</u>			
	, print clearly using the n				
Name: Last Name	First Name		Colleague	ID#:	
Home Phone #: ()				l:	
Major Course of Study:				dent? (circle one)	
Indicate your campus preference by rat					
Would you be interested in working OF					
I understand that as a Student Worker I classes are in session and that my earn understand that all information I may Worker Study Handbook, which is available.	I cannot work more than 20 nings must not exceed my have access to while work	hours a week Academic Yea king is strictly	in total, even if w r Federal Work Str	orking in another dep idy Award (FWS), i	f applicable. I
Student Signature			Date	//	
each position if the student is working in All incomplete forms will be returned. aid award, my department will incur conbudget. FWS Students' may not work aduring school breaks. Students' may not will track students' hours to ensure condepartment and miscellaneous changes. Budget Director and input into DATA. I would like to hire the above named structured the above named student for the property of the proper	By signing this form I und ost of the earnings over the amore than 20 hours per were of work more than 29 hours appliance. Supervisors should be above named student TEL and the supervisor restricted under: $()$ one	erstand the following amount awards as when classes per week if the ld complete a standard may not beging the ceives a fully of FWS Program	owing: If the student by stare in session and ey are on Departm Student Reassignm working until this executed copy.	ent earns more than the being placed on my lanot more than 35 hours and budget. As a Sent Form for all general section is signed app	the financial department's ours per week supervisor I eral ledger, aroved by the get Place
hired the above named student for the p	osition of:		Projected Start I	Date://_ Month Day	Year
Department:	_ Location (circle one): (Cranford Eliz	abeth Plainfield	Off Campus:	
Authorized Supervisor (Print)					
			Supervisor Signatu	re	
Alternate Supervisor (Print)			Alternate Superviso	or Signature	
Section II	I – Funding Approva				
Hourly Wage: \$					/ Year
(If applicable) The above named studer	nt has been awarded FWS i	n the amount o	f: \$		
Funding Approval:			D	ate: /	/

Section IV – Human Resources Approval



UNION COUNTY COLLEGE STUDENT APPLICATION FORM (Please Print)

Name:		_ Colleague	ID #:
Address:			·
Home Phone #:		Cell Phone	e #:
Days per week and number of hours	per week you are	available to w	vork:
WednesdayThursdayFriday			irs
Are you currently receiving Financia	al Aid?	Yes	No
Are you in the process of applying f	Yes	No	
Are you an International Student?		Yes	No
Areas of employment in which you			
Have you been employed by Union			
If yes, please indicate job and length	•		
List below your current and/or past (please attach another sheet of pape			
Name of Company	Type of Job	Len	gth of Service
Signature:		Date:	

Union County College does not discriminate on the basis of race, color, national origin, sex, marital status, religion, age, disability, handicap, or other legally protected status in its provision of employment, education, activities, and/or other services.



All employees of Union County College are asked to complete the following Emergency Information Form.

This information will be held as confidential and will only be used in case of an emergency.

Please Type or Print Date Name First Middle Last Address Town Zip Code Street Home Telephone Cell phone Preferred E-mail Address **Emergency Contact 1:** Name______ Relationship_____ Home Phone Cell Business Phone Preferred E-mail Address **Emergency Contact 2:** Name______ Relationship_____ Home Phone Cell Business Phone Preferred É-mail Address

Form W-4 (Rev. December 2020) Department of the Treasury Internal Revenue Service

Employee's Withholding Certificate

► Complete Form W-4 so that your employer can withhold the correct federal income tax from your pay.

► Give Form W-4 to your employer.

▶ Your withholding is subject to review by the IRS.

2021

OMB No. 1545-0074

Step 1:	(a) First name and middle initial	Last name		(b) So	cial security number	
Enter Personal nformation	Address			name of card?	your name match the n your social security not, to ensure you get	
	City or town, state, and ZIP code			credit for your earnings, contact SSA at 800-772-1213 or go to www.ssa.gov.		
	(c) Single or Married filing separately					
	Married filing jointly or Qualifying widow(er) Head of household (Check only if you're unmar	ried and pay more than half the costs	of keeping up a home for vo	urself and	l a qualifying individual)	
Dammlata Cta						
	ps 2–4 ONLY if they apply to you; otherwison from withholding, when to use the estimate			on on ea	ach step, who can	
Step 2: Multiple Jobs	Complete this step if you (1) hold me also works. The correct amount of with					
or Spouse	Do only one of the following.					
Vorks	(a) Use the estimator at www.irs.gov/	W4App for most accurate wi	thholding for this step	(and S	teps 3-4); or	
	(b) Use the Multiple Jobs Worksheet on	. •	,	•	•	
	(c) If there are only two jobs total, you is accurate for jobs with similar pay					
	TIP: To be accurate, submit a 2021 income, including as an independent			se) have	e self-employment	
	ps 3–4(b) on Form W-4 for only ONE of thate if you complete Steps 3–4(b) on the Form			bs. (Yo	ur withholding will	
Step 3:	If your total income will be \$200,000 of	or less (\$400,000 or less if ma	rried filing jointly):			
Claim Dependents	Multiply the number of qualifying ch	nildren under age 17 by \$2,000	▶ <u></u> \$	-		
	Multiply the number of other depe	endents by \$500	▶ <u>\$</u>	-		
	Add the amounts above and enter the	e total here		3	\$	
Step 4 optional):	(a) Other income (not from jobs). If this year that won't have withholdir include interest, dividends, and retire	ng, enter the amount of other i			\$	
Other Adjustments	,			-(-)		
-ajustinents	(b) Deductions. If you expect to cla and want to reduce your withhold enter the result here	im deductions other than the ing, use the Deductions World	e standard deduction ksheet on page 3 and	4(b)	\$	
	enter the result here			.(2)		
	(c) Extra withholding. Enter any add	itional tax you want withheld	each pay period .	4(c)	\$	
Step 5:	Under penalties of perjury, I declare that this cert	ificate to the best of my knowled	lae and helief is true or	orrect ar	nd complete	
Sign Here		•	L	51100t, ui	ia complete.	
	Employee's signature (This form is not v	valid unless you sign it.)	• Da	ate		
Employers Only	Employer's name and address		I	Employe number	er identification (EIN)	

Form W-4 (2021) Page **2**

General Instructions

Future Developments

For the latest information about developments related to Form W-4, such as legislation enacted after it was published, go to www.irs.gov/FormW4.

Purpose of Form

Complete Form W-4 so that your employer can withhold the correct federal income tax from your pay. If too little is withheld, you will generally owe tax when you file your tax return and may owe a penalty. If too much is withheld, you will generally be due a refund. Complete a new Form W-4 when changes to your personal or financial situation would change the entries on the form. For more information on withholding and when you must furnish a new Form W-4, see Pub. 505, Tax Withholding and Estimated Tax.

Exemption from withholding. You may claim exemption from withholding for 2021 if you meet both of the following conditions: you had no federal income tax liability in 2020 and you expect to have no federal income tax liability in 2021. You had no federal income tax liability in 2020 if (1) your total tax on line 24 on your 2020 Form 1040 or 1040-SR is zero (or less than the sum of lines 27, 28, 29, and 30), or (2) you were not required to file a return because your income was below the filing threshold for your correct filing status. If you claim exemption, you will have no income tax withheld from your paycheck and may owe taxes and penalties when you file your 2021 tax return. To claim exemption from withholding, certify that you meet both of the conditions above by writing "Exempt" on Form W-4 in the space below Step 4(c). Then, complete Steps 1(a), 1(b), and 5. Do not complete any other steps. You will need to submit a new Form W-4 by February 15, 2022.

Your privacy. If you prefer to limit information provided in Steps 2 through 4, use the online estimator, which will also increase accuracy.

As an alternative to the estimator: if you have concerns with Step 2(c), you may choose Step 2(b); if you have concerns with Step 4(a), you may enter an additional amount you want withheld per pay period in Step 4(c). If this is the only job in your household, you may instead check the box in Step 2(c), which will increase your withholding and significantly reduce your paycheck (often by thousands of dollars over the year).

When to use the estimator. Consider using the estimator at www.irs.gov/W4App if you:

- Expect to work only part of the year;
- 2. Have dividend or capital gain income, or are subject to additional taxes, such as Additional Medicare Tax;
- 3. Have self-employment income (see below); or
- 4. Prefer the most accurate withholding for multiple job situations.

Self-employment. Generally, you will owe both income and self-employment taxes on any self-employment income you receive separate from the wages you receive as an employee. If you want to pay these taxes through withholding from your wages, use the estimator at www.irs.gov/W4App to figure the amount to have withheld.

Nonresident alien. If you're a nonresident alien, see Notice 1392, Supplemental Form W-4 Instructions for Nonresident Aliens, before completing this form.

Specific Instructions

Step 1(c). Check your anticipated filing status. This will determine the standard deduction and tax rates used to compute your withholding.

Step 2. Use this step if you (1) have more than one job at the same time, or (2) are married filing jointly and you and your spouse both work.

Option (a) most accurately calculates the additional tax you need to have withheld, while option (b) does so with a little less accuracy.

If you (and your spouse) have a total of only two jobs, you may instead check the box in option (c). The box must also be checked on the Form W-4 for the other job. If the box is checked, the standard deduction and tax brackets will be cut in half for each job to calculate withholding. This option is roughly accurate for jobs with similar pay; otherwise, more tax than necessary may be withheld, and this extra amount will be larger the greater the difference in pay is between the two jobs.



Multiple jobs. Complete Steps 3 through 4(b) on only one Form W-4. Withholding will be most accurate if you do this on the Form W-4 for the highest paying job.

Step 3. This step provides instructions for determining the amount of the child tax credit and the credit for other dependents that you may be able to claim when you file your tax return. To qualify for the child tax credit, the child must be under age 17 as of December 31, must be your dependent who generally lives with you for more than half the year, and must have the required social security number. You may be able to claim a credit for other dependents for whom a child tax credit can't be claimed, such as an older child or a qualifying relative. For additional eligibility requirements for these credits, see Pub. 972, Child Tax Credit and Credit for Other Dependents. You can also include other tax credits in this step, such as education tax credits and the foreign tax credit. To do so, add an estimate of the amount for the year to your credits for dependents and enter the total amount in Step 3. Including these credits will increase your paycheck and reduce the amount of any refund you may receive when you file your tax return.

Step 4 (optional).

Step 4(a). Enter in this step the total of your other estimated income for the year, if any. You shouldn't include income from any jobs or self-employment. If you complete Step 4(a), you likely won't have to make estimated tax payments for that income. If you prefer to pay estimated tax rather than having tax on other income withheld from your paycheck, see Form 1040-ES, Estimated Tax for Individuals.

Step 4(b). Enter in this step the amount from the Deductions Worksheet, line 5, if you expect to claim deductions other than the basic standard deduction on your 2021 tax return and want to reduce your withholding to account for these deductions. This includes both itemized deductions and other deductions such as for student loan interest and IRAs.

Step 4(c). Enter in this step any additional tax you want withheld from your pay **each pay period**, including any amounts from the Multiple Jobs Worksheet, line 4. Entering an amount here will reduce your paycheck and will either increase your refund or reduce any amount of tax that you owe.

Form W-4 (2021)

Step 2(b) – Multiple Jobs Worksheet (Keep for your records.)



If you choose the option in Step 2(b) on Form W-4, complete this worksheet (which calculates the total extra tax for all jobs) on **only ONE** Form W-4. Withholding will be most accurate if you complete the worksheet and enter the result on the Form W-4 for the highest paying job.

Note: If more than one job has annual wages of more than \$120,000 or there are more than three jobs, see Pub. 505 for additional tables; or, you can use the online withholding estimator at www.irs.gov/W4App.

1	Two jobs. If you have two jobs or you're married filing jointly and you and your spouse each have one job, find the amount from the appropriate table on page 4. Using the "Higher Paying Job" row and the "Lower Paying Job" column, find the value at the intersection of the two household salaries and enter that value on line 1. Then, skip to line 3	1	\$
2	Three jobs. If you and/or your spouse have three jobs at the same time, complete lines 2a, 2b, and 2c below. Otherwise, skip to line 3.		
	a Find the amount from the appropriate table on page 4 using the annual wages from the highest paying job in the "Higher Paying Job" row and the annual wages for your next highest paying job in the "Lower Paying Job" column. Find the value at the intersection of the two household salaries and enter that value on line 2a	2 a	\$
	b Add the annual wages of the two highest paying jobs from line 2a together and use the total as the wages in the "Higher Paying Job" row and use the annual wages for your third job in the "Lower Paying Job" column to find the amount from the appropriate table on page 4 and enter this amount on line 2b	2b	\$
	c Add the amounts from lines 2a and 2b and enter the result on line 2c	2c	\$
3	Enter the number of pay periods per year for the highest paying job. For example, if that job pays weekly, enter 52; if it pays every other week, enter 26; if it pays monthly, enter 12, etc	3	
4	Divide the annual amount on line 1 or line 2c by the number of pay periods on line 3. Enter this amount here and in Step 4(c) of Form W-4 for the highest paying job (along with any other additional amount you want withheld)	4	\$
	Step 4(b) - Deductions Worksheet (Keep for your records.)		
1	Enter an estimate of your 2021 itemized deductions (from Schedule A (Form 1040)). Such deductions may include qualifying home mortgage interest, charitable contributions, state and local taxes (up to \$10,000), and medical expenses in excess of 7.5% of your income	1	\$
2	Enter: • \$25,100 if you're married filing jointly or qualifying widow(er) • \$18,800 if you're head of household • \$12,550 if you're single or married filing separately	2	\$
3	If line 1 is greater than line 2, subtract line 2 from line 1 and enter the result here. If line 2 is greater than line 1, enter "-0-"	3	\$
4	Enter an estimate of your student loan interest, deductible IRA contributions, and certain other adjustments (from Part II of Schedule 1 (Form 1040)). See Pub. 505 for more information	4	\$
5	Add lines 3 and 4. Enter the result here and in Step 4(b) of Form W-4	5	\$

Privacy Act and Paperwork Reduction Act Notice. We ask for the information on this form to carry out the Internal Revenue laws of the United States. Internal Revenue Code sections 3402(f)(2) and 6109 and their regulations require you to provide this information; your employer uses it to determine your federal income tax withholding. Failure to provide a properly completed form will result in your being treated as a single person with no other entries on the form; providing fraudulent information may subject you to penalties. Routine uses of this information include giving it to the Department of Justice for civil and criminal litigation; to cities, states, the District of Columbia, and U.S. commonwealths and possessions for use in administering their tax laws; and to the Department of Health and Human Services for use in the National Directory of New Hires. We may also disclose this information to other countries under a tax treaty, to federal and state agencies to enforce federal nontax criminal laws, or to federal law enforcement and intelligence agencies to combat terrorism.

You are not required to provide the information requested on a form that is subject to the Paperwork Reduction Act unless the form displays a valid OMB control number. Books or records relating to a form or its instructions must be retained as long as their contents may become material in the administration of any Internal Revenue law. Generally, tax returns and return information are confidential, as required by Code section 6103.

The average time and expenses required to complete and file this form will vary depending on individual circumstances. For estimated averages, see the instructions for your income tax return.

If you have suggestions for making this form simpler, we would be happy to hear from you. See the instructions for your income tax return.

Form W-4 (2021) Page **4**

FOITH VV-4 (2021)			Marri	ed Filing	Jointly	or Quali	fvina Wid	dow(er)				Page 4
Higher Paying Job			IVIGITI					Wage & S	Salary			
Annual Taxable Wage & Salary	\$0 - 9,999	\$10,000 - 19,999	\$20,000 - 29,999	\$30,000 - 39,999	\$40,000 - 49,999	\$50,000 - 59,999	\$60,000 - 69,999	\$70,000 - 79,999	\$80,000 - 89,999	\$90,000 - 99,999	\$100,000 - 109,999	\$110,000 - 120,000
\$0 - 9,999	\$0	\$190	\$850	\$890	\$1,020	\$1,020	\$1,020	\$1,020	\$1,020	\$1,100	\$1,870	\$1,870
\$10,000 - 19,999	190	1,190	1,890	2,090	2,220	2,220	2,220	2,220	2,300	3,300	4,070	4,070
\$20,000 - 29,999	850	1,890	2,750	2,950	3,080	3,080	3,080	3,160	4,160	5,160	5,930	5,930
\$30,000 - 39,999	890	2,090	2,950	3,150	3,280	3,280	3,360	4,360	5,360	6,360	7,130	7,130
\$40,000 - 49,999	1,020	2,220	3,080	3,280	3,410	3,490	4,490	5,490	6,490	7,490	8,260	8,260
\$50,000 - 59,999	1,020	2,220	3,080	3,280	3,490	4,490	5,490	6,490	7,490	8,490	9,260	9,260
\$60,000 - 69,999	1,020	2,220	3,080	3,360	4,490	5,490	6,490	7,490	8,490	9,490	10,260	10,260
\$70,000 - 79,999	1,020	2,220	3,160	4,360	5,490	6,490	7,490	8,490	9,490	10,490	11,260	11,260
\$80,000 - 99,999	1,020	3,150	5,010	6,210	7,340	8,340	9,340	10,340	11,340	12,340	13,260	13,460
\$100,000 - 149,999	1,870	4,070	5,930	7,130	8,260	9,320	10,520	11,720	12,920	14,120	15,090	15,290
\$150,000 - 239,999	2,040	4,440	6,500	7,900	9,230	10,430	11,630	12,830	14,030	15,230	16,190	16,400
\$240,000 - 259,999	2,040	4,440	6,500	7,900	9,230	10,430	11,630	12,830	14,030	15,270	17,040	18,040
\$260,000 - 279,999	2,040	4,440	6,500	7,900	9,230	10,430	11,630	12,870	14,870	16,870	18,640	19,640
\$280,000 - 299,999	2,040	4,440	6,500	7,900	9,230	10,470	12,470	14,470	16,470	18,470	20,240	21,240
\$300,000 - 319,999	2,040	4,440	6,500	7,940	10,070	12,070	14,070	16,070	18,070	20,070	21,840	22,840
\$320,000 - 364,999 \$365,000 - 524,999	2,720 2,970	5,920 6,470	8,780 9,630	10,980 12,130	13,110 14,560	15,110 16,860	17,110 19,160	19,110 21,460	21,190 23,760	23,490 26,060	25,560 28,130	26,860 29,430
\$525,000 - 524,999 \$525,000 and over	3,140	6,840	10,200	12,130	15,530	18,030	20,530	23,030	25,760	28,030	30,300	31,800
φ323,000 and over	3,140	0,040		Single o					25,550	20,030	30,300	31,000
Higher Paying Job								Wage & S	Salarv			
Annual Taxable	\$0 -	\$10,000 -	\$20,000 -	\$30,000 -	\$40,000 -	\$50,000 -	\$60,000 -	\$70,000 -	\$80,000 -	\$90,000 -	\$100,000 -	\$110,000 -
Wage & Salary	9,999	19,999	29,999	39,999	49,999	59,999	69,999	79,999	89,999	99,999	109,999	120,000
\$0 - 9,999	\$440	\$940	\$1,020	\$1,020	\$1,410	\$1,870	\$1,870	\$1,870	\$1,870	\$2,030	\$2,040	\$2,040
\$10,000 - 19,999	940	1,540	1,620	2,020	3,020	3,470	3,470	3,470	3,640	3,840	3,840	3,840
\$20,000 - 29,999	1,020	1,620	2,100	3,100	4,100	4,550	4,550	4,720	4,920	5,120	5,120	5,120
\$30,000 - 39,999	1,020	2,020	3,100	4,100	5,100	5,550	5,720	5,920	6,120	6,320	6,320	6,320
\$40,000 - 59,999	1,870	3,470	4,550	5,550	6,690	7,340	7,540	7,740	7,940	8,140	8,150	8,150
\$60,000 - 79,999	1,870	3,470	4,690	5,890	7,090	7,740	7,940	8,140	8,340	8,540	9,190	9,990
\$80,000 - 99,999	2,000	3,810	5,090	6,290	7,490	8,140	8,340	8,540	9,390	10,390	11,190	11,990
\$100,000 - 124,999	2,040	3,840	5,120	6,320	7,520	8,360	9,360	10,360	11,360	12,360	13,410	14,510
<u>\$125,000 - 149,999</u>	2,040	3,840	5,120	6,910	8,910	10,360	11,360	12,450	13,750	15,050	16,160	17,260
\$150,000 - 174,999	2,220	4,830	6,910	8,910	10,910	12,600	13,900	15,200	16,500	17,800	18,910	20,010
\$175,000 - 199,999	2,720	5,320	7,490	9,790	12,090	13,850	15,150	16,450	17,750	19,050	20,150	21,250
\$200,000 - 249,999	2,970	5,880	8,260	10,560	12,860	14,620	15,920	17,220	18,520	19,820	20,930	22,030
\$250,000 - 399,999	2,970	5,880	8,260	10,560	12,860	14,620	15,920	17,220	18,520	19,820	20,930	22,030
\$400,000 - 449,999 \$450,000 and over	2,970 3,140	5,880 6,250	8,260 8,830	10,560 11,330	12,860 13,830	14,620 15,790	15,920 17,290	17,220 18,790	18,520 20,290	19,910 21,790	21,220 23,100	22,520
φ450,000 and over	3,140	0,230	0,030			Househo	<u> </u>	10,790	20,290	21,790	23,100	24,400
Higher Paying Job								Wage & S	Salarv			
Annual Taxable Wage & Salary	\$0 - 9,999	\$10,000 - 19,999	\$20,000 - 29,999	\$30,000 - 39,999	\$40,000 - 49,999	\$50,000 - 59,999	\$60,000 - 69,999	\$70,000 - 79,999	\$80,000 - 89,999	\$90,000 - 99,999	\$100,000 - 109,999	\$110,000 - 120,000
\$0 - 9,999	\$0	\$820	\$930	\$1,020	\$1,020	\$1,020	\$1,420	\$1,870	\$1,870	\$1,910	\$2,040	\$2,040
\$10,000 - 19,999	820	1,900	2,130	2,220	2,220	2,620	3,620	4,070	4,110	4,310	4,440	4,440
\$20,000 - 29,999	930	2,130	2,360	2,450	2,850	3,850	4,850	5,340	5,540	5,740	5,870	5,870
\$30,000 - 39,999	1,020	2,220	2,450	2,940	3,940	4,940	5,980	6,630	6,830	7,030	7,160	7,160
\$40,000 - 59,999	1,020	2,470	3,700	4,790	5,800	7,000	8,200	8,850	9,050	9,250	9,380	9,380
\$60,000 - 79,999	1,870	4,070	5,310	6,600	7,800	9,000	10,200	10,850	11,050	11,250	11,520	12,320
\$80,000 - 99,999	1,880	4,280	5,710	7,000	8,200	9,400	10,600	11,250	11,590	12,590	13,520	14,320
\$100,000 - 124,999	2,040	4,440	5,870	7,160	8,360	9,560	11,240	12,690	13,690	14,690	15,670	16,770
\$125,000 - 149,999	2,040	4,440	5,870	7,240	9,240	11,240	13,240	14,690	15,890	17,190	18,420	19,520
\$150,000 - 174,999	2,040	4,920	7,150	9,240	11,240	13,290	15,590	17,340	18,640	19,940	21,170	22,270
\$175,000 - 199,999	2,720	5,920	8,150	10,440	12,740	15,040	17,340	19,090	20,390	21,690	22,920	24,020
\$200,000 - 249,999	2,970	6,470	9,000	11,390	13,690	15,990	18,290	20,040	21,340	22,640	23,880	24,980
\$250,000 - 349,999	2,970	6,470	9,000	11,390	13,690	15,990	18,290	20,040	21,340	22,640	23,880	24,980
\$350,000 - 449,999	2,970	6,470	9,000	11,390	13,690	15,990	18,290	20,040	21,340	22,640	23,900	25,200
\$450,000 and over	3,140	6,840	9,570	12,160	14,660	17,160	19,660	21,610	23,110	24,610	26,050	27,350

UNION COUNTY COLLEGE Payroll Direct Deposit Authorization Agreement

Bank Account# 1	☐ Savings
Bank Name	
Routing#	
Account#	
I wish to deposit (check one):	One of the following must be attach (check one)
☐ Entire Net Pay	□ Voided Check
☐ Specific Dollar Amount \$	00 Bank Letter or specification sh
Bank Account #2	□ Savings
Bank Name	·
Routing#	
Account#	
I wish to deposit (check one):	One of the following must be attached (check one)
☐ Remaining Net Pay	☐ Voided Check
☐ Specific Dollar Amount \$	00 Bank Letter or specification sł
Note: Ifan account is not designated for ne check.	et pay, the remaining net pay will be paid in the for
institution(s) listed above. I authorize the	to initiate electronic credit entries to the financial financial institution(s) to accept and credit the amority is to remain in full force and effect until I have
Employee Signature	Date



Employment Eligibility Verification

Department of Homeland Security

U.S. Citizenship and Immigration Services

USCIS Form I-9

OMB No. 1615-0047

►START HERE: Read instructions carefully before completing this form. The instructions must be available, either in paper or electronically, during completion of this form. Employers are liable for errors in the completion of this form.

ANTI-DISCRIMINATION NOTICE: It is illegal to discriminate against work-authorized individuals. Employers specify which document(s) an employee may present to establish employment authorization and identity. The refusal to hire or continue to employ an individual because the documentation presented has a future expiration date may also constitute illegal discrimination.

Section 1. Employee Informati			nust complete ar	nd sign S	ection 1	of Form I-9 no later
Last Name (Family Name)	First Name (Given I		Middle Initial	Other L	ast Name:	s Used <i>(if any)</i>
Address (Street Number and Name)	Apt. Number	er City or Town		1	State	ZIP Code
Date of Birth (mm/dd/yyyy) U.S. Social	Security Number En	nployee's E-mail Ad	dress	E	mployee's	Telephone Number
I am aware that federal law provides connection with the completion of the I attest, under penalty of perjury, that	nis form.			or use o	f false do	ocuments in
1. A citizen of the United States	train (check one or	uie following bo	ACS).			
2. A noncitizen national of the United St	ates (See instructions)					
3. A lawful permanent resident (Alien	,	CIS Number):				
4. An alien authorized to work until (e. Some aliens may write "N/A" in the e						
Aliens authorized to work must provide on An Alien Registration Number/USCIS Num	ber OR Form I-94 Admis					R Code - Section 1 lot W rite In This Space
Alien Registration Number/USCIS Num OR	nber:					
2. Form I-94 Admission Number:						
OR						
3. Foreign Passport Number:						
Country of Issuance:						
Signature of Employee			Today's Dat	e (mm/da	l/yyyy)	· · · · · · · · · · · · · · · · · · ·
Preparer and/or Translator Ce I did not use a preparer or translator. (Fields below must be completed and s	A preparer(s) and/or	r translator(s) assist				
I attest, under penalty of perjury, tha knowledge the information is true ar		ne completion o	Section 1 of th	is form	and that	to the best of my
Signature of Preparer or Translator				Today's	Date (mn	n/dd/yyyy)
Last Name (Family Name)		First Na	me (Given Name)			
Address (Street Number and Name)	,	City or Town			State	ZIP Code
		Click to Finish			1	

STOP

Employer Completes Next Page



LISTS OF ACCEPTABLE DOCUMENTS All documents must be UNEXPIRED

Employees may present one selection from List A or a combination of one selection from List B and one selection from List C.

	LIST A Documents that Establish Both Identity and Employment Authorization	OR	LIST B Documents that Establish Identity AN	ID	LIST C Documents that Establish Employment Authorization
2.	U.S. Passport or U.S. Passport Card Permanent Resident Card or Alien Registration Receipt Card (Form I-551) Foreign passport that contains a		Driver's license or ID card issued by a State or outlying possession of the United States provided it contains a photograph or information such as name, date of birth, gender, height, eye color, and address	1.	A Social Security Account Number card, unless the card includes one of the following restrictions: (1) NOT VALID FOR EMPLOYMENT (2) VALID FOR WORK ONLY WITH
	temporary I-551 stamp or temporary I-551 printed notation on a machine-readable immigrant visa Employment Authorization Document		2. ID card issued by federal, state or local government agencies or entities, provided it contains a photograph or information such as name, date of birth,	2.	INS AUTHORIZATION (3) VALID FOR WORK ONLY WITH DHS AUTHORIZATION Certification of report of birth issued
5.	that contains a photograph (Form I-766) For a nonimmigrant alien authorized to work for a specific employer because of his or her status:		gender, height, eye color, and address 3. School ID card with a photograph 4. Voter's registration card	3.	by the Department of State (Forms DS-1350, FS-545, FS-240) Original or certified copy of birth certificate issued by a State, county, municipal authority, or
	a. Foreign passport; andb. Form I-94 or Form I-94A that has the following:(1) The same name as the passport;		 U.S. Military card or draft record Military dependent's ID card U.S. Coast Guard Merchant Mariner Card 	4.	territory of the United States bearing an official seal Native American tribal document U.S. Citizen ID Card (Form I-197)
	and (2) An endorsement of the alien's nonimmigrant status as long as that period of endorsement has not yet expired and the		Native American tribal document Driver's license issued by a Canadian government authority	6.	Identification Card for Use of Resident Citizen in the United States (Form I-179)
	proposed employment is not in conflict with any restrictions or limitations identified on the form. Passport from the Federated States of		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
0.	Micronesia (FSM) or the Republic of the 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		 School record or report card Clinic, doctor, or hospital record Day-care or nursery school record 		

Examples of many of these documents appear in Part 13 of the Handbook for Employers (M-274).

Refer to the instructions for more information about acceptable receipts.

Form I-9 10/21/2019 Page 3 of 3

GET



Union County College Department of Public Safety alerting you to a major campus emergency.

Register for REGROUP at:

https://ucc.regroup.com/signup

for your Union County College Emergency Alert