



**Student Employment Program LH-809 x 3137**

- Fall \_\_\_\_\_
- Spring \_\_\_\_\_
- Summer \_\_\_\_\_

**AUTHORIZATION PERIOD(S)** (please check appropriate box)

- Start Date: \_\_\_\_ / \_\_\_\_ / \_\_\_\_
- This student is a new hire I-9 & SPAR are attached
  - This student is a rehire to a new department I-9 & SPAR are attached
  - This student is a rehire in same department I-9 & SPAR on file

**STUDENT DATA** CWID \_\_\_\_\_ SSN \_\_\_\_\_

Last Name: \_\_\_\_\_ First Name: \_\_\_\_\_ M.I. \_\_\_\_\_

(As printed on Social Security Card)

Name used other than on Social Security Card: \_\_\_\_\_

(Last Name, First Name, M.I.)

**EMPLOYER APPROVAL/AUTHORIZATION HIRE**

Position # \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_ / Department \_\_\_\_\_  
Agency Unit Class Serial

Student's Position Title \_\_\_\_\_

Work Supervisor \_\_\_\_\_ Ext. \_\_\_\_\_ Location \_\_\_\_\_

Attendance Clerk \_\_\_\_\_ Ext. \_\_\_\_\_ Location \_\_\_\_\_

Salary Rate: Range \_\_\_\_\_ Step \_\_\_\_\_ \*\$ \_\_\_\_\_ For \_\_\_\_\_ \*\*hours per week

\*Exception: If you believe the student warrants placement at step 2 or 3 due to his/ her demonstrated previous work experience or educational background, please indicate the appropriate step with a brief explanation of your recommendation here. Attach a justification memo for any placement above step 3.

\*\*May work up to 40 hours during winter recess, intersession, and spring recess

**ACADEMIC YEAR**

- I have paid part-time fees at CSUF and am enrolled in 6 units or less.  
I understand that my earnings will be subject to deductions for retirement (7.5%) & Medicare (1.4 5%)

- After my MPP Appropriate Administrator agrees to allow me access, I understand I will be granted access to personal and confidential information based on my agreement to comply with the terms and conditions outlined in the University Training and Compliance document.

- SUMMER**  
I was enrolled at CSUF in the Spring, and/or am Enrolled0- at CSUF for Fall, or am taking classes at CSUF this summer. I understand that my earnings will be subject to retirement (up to 7.5%) & Medicare deductions up to (up to 1.45%).

\_\_\_\_\_  
Student Employee Signature Date

I have verified the enrollment/fee payment status indicated above by viewing a current fee receipt.  
In addition, I will verify enrollment for each semester this student is employed by this department

\_\_\_\_\_  
Authorized Department Signature Date

**NOTE:** Please submit this form and, if appropriate, SPAR & I-9 forms to CP&PC, LH-208. After authorization this form will be forwarded to Payroll Services. CP&PC will notify you when the student has been approved to work. **Do not allow a student to begin working until authorization is received.** CP&PC Use Only

Authorized by: \_\_\_\_\_ Date \_\_\_\_\_

**California State University, Fullerton**  
**Information Security**  
**Training & Compliance Document**

THE FOLLOWING APPLIES TO ALL UNIVERSITY EMPLOYEES, INCLUDING STUDENT EMPLOYEES (FEDERAL WORK STUDY STUDENTS, STUDENT ASSISTANTS, GRADUATE ASSISTANTS, AND TEACHING ASSISTANTS), *WHO NOW HAVE, OR MAY IN THE FUTURE HAVE*, ACCESS TO FEDERALLY OR STATE PROTECTED INFORMATION.

***PLEASE READ THE FOLLOWING CAREFULLY.***  
***CONTACT YOUR SUPERVISOR IF YOU HAVE QUESTIONS NOW OR IN THE FUTURE.***

The University has the legal responsibility to secure information protected by federal and state law, as well as California State University policies and procedures. These regulations place specific requirements on state agencies in relation to the collection, use, maintenance and dissemination of information relating to individuals. All employees, including student employees, are responsible for collecting, using, maintaining or releasing protected information in accordance with federal and state laws or regulations, as well as CSU policies and procedures. In order to protect the privacy of individuals, maintenance and dissemination of personal information is subject to strict limits. As such, all student employees are responsible for the following:

1. Accessing protected information only as necessary to perform their job. Accessing protected information unnecessary to perform job responsibilities is expressly prohibited.
2. Maintaining the privacy and confidentiality of protected information obtained.
3. Sharing protected information with others, electronically or otherwise, ***only after ensuring*** the recipient is authorized to receive the information and understands his/her responsibilities.
4. Preventing unauthorized access to protected information, including but not limited to storing, securing and disposing of protected information, data, reports, etc. in a manner that maintains their confidentiality. This includes, but is not limited to, signing off computers and using other means to prevent unauthorized access to protected information not actively in use, and not disclosing passwords to others unless authorized to do so in writing by his/her immediate supervisor.
5. Utilizing protected information only as compatible with the disclosed purpose for which it was collected, and making every reasonable effort to interpret protected information in an accurate, relevant, and professional manner.

Employees, including student employees, misusing protected information obtained through their employment shall be subject to disciplinary action, up to and including dismissal. Violation of state or federal laws may carry the additional consequence of prosecution under the law, where judicial action may result in specific fines, imprisonment, litigation costs, damages or all.

### **Definitions**

*Protected Information:* Federal and state regulations and CSU policies use a variety of terms to identify protected information, such as: non public information; personal information, individually identifiable health information; confidential information; personally identifiable information; confidential personal information; and sensitive information. Protected information includes information identifying or describing an individual, including, but not limited to: his or her name, social security number, physical description, home address, home telephone number, education, financial matters, and medical or employment history. It includes statements made by, or attributed to, the individual.

The term "*disclose*" means to disclose, release, transfer, disseminate, or otherwise communicate all or any part of any record orally, in writing, or by electronic or any other means to any person or entity.

**THIS INFORMATION SHOULD BE KEPT BY THE STUDENT EMPLOYEE FOR THEIR RECORDS**