

**EMPLOYEE INFORMATION FORM** 

Social Security Number		Date of Birth	Date of Birth	
Last Name	First Name	Middle Initial	Supervisor	
Address (to be used for	r federal form W-2 mailir	ngs)		
City		State Zip Code		
Phone Number	please selec home cell	et: E-mail addr	ess	
Are you a full time Rutg student? yes	-	Are you currently working for any other Rutgers departments/centers?		
no				

If yes, how many hours are you working per week? (please note: students cannot work more than 20 hours per week when classes are in session and no more than 40 hours per week during breaks)

Are you a US Citizen? If no, please provide a copy of your Immigration Documents (ex. Visa, Passport, I-20, I-94 & International Payroll Form)

yes

no