san josé·evergreen
COMMUNITY COLLEGE DISTRICT

HUMAN RESOURCES SERVICES GROUP

▪ 40 South Market St. ▪ San José, CA 95113 408-270-6406 ▪ 408-239-8825 (fax)

Student Assistant Election Request Check Off List for Continuing (No Break) Employee

☐ Board Election Complete
a. Top Portion Filled Out Completely
b. Budget Officer Signature
c. All Appropriate Signatures

san josé-evergreen COMMUNITY COLLEGE DISTRICT

OFFICE OF HUMAN RESOURCES

STUDENT ASSISTANT ELECTION REQUEST

Work Location:
☐ District Office ☐ Evergreen Valley ☐ San Jose City
☐ Off Campus: _____ (i.e. WIN/CalWorks)

☐ Student Trustee
☐ Student Assistant ($18/hour)
☐ Classroom/Lab Tutor ($18/hour)
☐ Community Service Officer Cadet ($18/hour)
☐ Student Mentor ($18/hour)
☐ Tobacco Peer Educator ($18/hour)
☐ Student Services Runner ($18/hour)
☐ Camp Aide Student Assistant ($18/hour)
☐ Athletics Lab Assistant ($18/hour)
☐ Athletics Event Assistant ($18/hour)
☐ Athletics Office Assistant ($18/hour)

For Off Campus Workstudy Use Only
☐ Student Assistant ($18/hour)
Rate of Pay: $ /hour

Program:
☐ College Work Experience Program
☐ FWS Student Assistant I ($18/hour)
☐ FWS Student Assistant II ($19/hour)
☐ WIN/CalWorks ($18/hour)
☐ LAEP ($18/hour)

Employee Information: *(Verify most current information)*

Employee ID # _____ Position ID _____

Legal Last Name _____ Legal First Name _____ Legal M.I. _____ Social Security # _____

Address (Street, City, State, Zip) _____ Phone Number _____ ☐ Cell ☐ Home

Gender: ☐ Male ☐ Female

Birthdate: _____

Department: _____

1. Previously on District payroll? ☐ Yes ☐ No If yes, when? _____
2. Relatives in employment by District? ☐ Yes ☐ No
   If yes, name(s): _____
3. Currently *(or in this recent semester)* working/volunteering for SJCC/EVC/DO? ☐ Yes ☐ No If yes, what dept.? _____ What is/was your title? _____
4. Currently an International Student? ☐ Yes ☐ No

Units Load: _____ Semester: _____ Year: _____

Will be taking classes during the summer/intersession? ☐ Yes ☐ No
If yes, *must* check one: ☐ Enrolled in the previous semester in a minimum of 6 units.
☐ *Not* enrolled in the previous semester in a minimum of 6 units *or* dropped below 6 units in the previous semester.

Position Information:

Start Date: _____ End Date: _____ Work Schedule: _____ (**Attach work calendar**)

Hours/Days: _____ Hours/Week: _____

Specific Job Duties *(Must be completed)*:

Required Employment Documents for New or Returning Employees than one year since employed)
Also required for International Students:
☐ I-9 ☐ DE4/W4
☐ Employment Information Form
☐ Personal Data Report Form
☐ I-94, I-20, Visa, and Valid Passport Bio Page
☐ Copy of Acceptable Documents from List A or B & C from Form I-9
☐ Payroll Information Form
☐ Workers' Comp. Physician Form
☐ Applicant Employee Survey
☐ Documents Already on File

Account Information:

Account #: _____ % _____

Account #: _____ % _____

Employment Authorization:

Election Request Prepared by: _____ Date: _____
Print Name

Name of Supv: _____ Signature: _____ Date: _____
Print Name

Area Admin/Dean: _____ Signature: _____ Date: _____

Academic/Admin. Svs./Budget Officer: _____ Signature: _____ Date: _____
Print Name

Human Resources Processing:

Approved By: _____ Processed By: _____ BE Date: _____ App/Docs on File: _____

Notes: _____

Bus. Serv. Rvw. _____ **Position ID** (For Timesheet): _____ Rate of Pay: $ /hour

HR/1.2024