

Western Connecticut State University
Student Employee Stipend Form

Purpose: This form is to be used for processing the payment of stipends for Student Employees in limited situations, which are considered unique in nature and not hourly, but rather per assignment. Some examples include payments to Resident Assistants, Orientation Leaders, and limited Recreation Department Student Employees.

Procedure:

1. The initiating department should complete the Requesting Department Section below and then forward the form to the Financial Aid Department for review.
2. The Financial Aid Department will verify that the student meets the student employment eligibility requirements and that the Core-CT Position # provided by the Requesting Department is correct. They will then sign the form at the approval section and forward it to the Human Resources Department for final review and processing.
3. The Human Resources Department will process the payment and notify the Student Employee and supervisor once this has been completed, which will serve as the authorization for the Student Employee to begin the assignment.
4. The stipend will be paid in equal biweekly installments in accordance with the biweekly payroll calendar.
5. **It is important to note that no Student Employee is authorized to work until the above steps have been completed.**

Requesting Department Section

Department Name: _____ Core-CT Position # _____

Student's Status: (check one) _____ New Student Employee _____ Returning Student Employee

Banner ID # (8 Digits): _____ International Student: (Check One) _____ Yes _____ No

Student's Name: _____

Assignment Starting Date: _____ Assignment Ending Date: _____

Description of Duties to be Performed:

Stipend Amount: \$ _____ Student's WCSU Email: _____@connect.wcsu.edu

Department Supervisor Signature _____ Date _____

Financial Aid Department Section

Matriculated (# of Credits): _____ Core-CT Position #: _____

Approval Signature: _____ Date _____

Human Resources Department Section

Record #: _____ Employee ID: _____

FICA Status:

_____ Exempt (Academic Year) _____ Exempt (Summer – 6SH or >) _____ Exempt (International) _____ Subject (Summer)

Check Once Completed: _____ Entered in Core _____ Emailed Student Employee & Supervisor Approval

Approval Signature: _____ Date _____

Effective Date: 2/20/2015