

The University of North Carolina at Greensboro  
**Federal Work-Study Student Action Form**

This form is to be filled out **completely** by the department when hiring or making a change to a work-study student's employment status. Return this form to the Student Employment Office immediately for New Student Assignment or Reassignment of returning student. This form must be received in the HR Department by the Personnel Action Deadline as posted on Banner HR – [http://banner.uncg.edu/hr/Dates\\_Deadlines](http://banner.uncg.edu/hr/Dates_Deadlines). (Ex: Received by January deadline to be paid in February). **Failure to submit this form by the deadline will result in a delay in the student's pay.**

(Check one)

- New Student Assignment for \_\_\_\_\_ - \_\_\_\_\_ academic year  
 Reassignment of returning student for \_\_\_\_\_ - \_\_\_\_\_ academic year  
 Change in Rate of Pay At the start of a new pay period ONLY (e.g. January 11<sup>th</sup>)  
 Notice of Separation: Number of hours student worked in the current pay period \_\_\_\_\_ (total hours)

Verified the total Federal Work-Study Award is \$ \_\_\_\_\_ . No more than ½ of the award can be used in Fall Term.

**PPAIDEN – IDENTIFICATION FORM: BANNER/STUDENT ID #:**

Name of Student (Last, First, M.I.): \_\_\_\_\_

Payroll Address (PY): \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Citizenship:  Citizen

Birth Date: \_\_\_\_\_

**PEAEMPL – EMPLOYEE FORM: EMPLOYEE CLASS: WS** Current Hire Date: **/11/**  
WS for Undergraduate

HOME DEPARTMENT ORG#: \_\_\_\_\_ CHECK DISTRIBUTION ORG#: \_\_\_\_\_

INS I-9 Completion Date: \_\_\_\_\_

**NBAJOBS – EMPLOYEE JOB FORM:**

**(JOBS DETAIL TAB) POSITION #:** \_\_\_\_\_ **SUFFIX #: 00** **RATE: \$** \_\_\_\_\_

**EFFECTIVE BEGIN DATE OF ACTION:** **/11/** or **/01/** **PERSONNEL BEGIN DATE:** **/11/**

(Effective Begin Date of action should be start of new pay period e.g. 11<sup>th</sup> – Personnel Begin Date will be equal to Effective Begin Date of Action.)

(If the Employee has a Last Paid Date on NBAJOBS, then the Effective Begin Date of Action will be the 1<sup>st</sup> of the month following the Last Paid Date - the Personnel Begin Date will be the 11<sup>th</sup> of the month in which the action should have taken place.)

**JOB BEGIN REASON:**  Authorized (AUTH)  Rate Change (RATE)

**(LABOR DISTRIBUTION TAB)**

**Federal Fund (SEO will fill in)**  State Fund # or  Department Fund # (25% Match - Revenue Depts Only)

**148503 - 140220**

**118001 - 140220 or - 140220**

**EFFECTIVE END DATE OF ACTION:** **/10/** **PERSONNEL END DATE:** **/10 /**

(Effective End Date of actions should be end of pay period e.g. 10<sup>th</sup> – Personnel End Date will be equal to Effective End Date of Action.)

**JOB END REASON: Select One**

Cancelled/Loss of Eligibility (CNCL)  Earned Max Award (EARN)  Resigned (RESN)  Terminated (TERM)

**ORIGINATING DEPARTMENT INFORMATION**

**HOME DEPARTMENT FULL NAME:**

Name of Student's Supervisor (please Type or print): \_\_\_\_\_

Phone #: \_\_\_\_\_

Position Title of Hired Student: \_\_\_\_\_

I attest that the information on this form is accurate and complete to the best of my knowledge.

Authorized Signature \_\_\_\_\_

Print Name \_\_\_\_\_

Date \_\_\_\_\_

**SEO USE ONLY**

1<sup>ST</sup> Time Entered in Banner:

Initials \_\_\_\_\_ Date \_\_\_\_\_

Changes:

Initials \_\_\_\_\_ Date \_\_\_\_\_

**SEO USE ONLY – Copy to HR**

Initials \_\_\_\_\_ Date \_\_\_\_\_

**ENTERED IN HR**

Initials \_\_\_\_\_ Date \_\_\_\_\_