



OHIO
UNIVERSITY

Human Resources

Existing Student Employee Information Sheet

Employee Section

Directions:

- All Information is required
- Complete all form using ink

Legal Name: _____ Employee Number: _____

OHIO ID: _____

PID#: _____ DOB: _____

Do you have another job on Campus? Yes No

If yes, what Department? _____ How many hours per week? _____

Employer Section

Directions:

- All Information is required
- Complete all form using ink
- The Supervisor is responsible for hiring the student into Workforce after receiving this form.
- Forward this form to University Human Resources, 103 HRTC.

Hiring Campus _____ Hiring Department _____

Organization Number _____ Student's Start Date: _____

Check one type of Employee: Hourly Graduate Resident Assistant

Printed name of person completing this Employer Section _____

Phone number _____ Today's Date _____

OHIO ID: _____