Student Employee FICA Withholding Form Summer 20___

This form must be completed for each student who will be working a normal schedule* of more than 30 hours per week. The *supervisor* is responsible for completing the form and delivering it to the university Student Payroll Office.

This form must be completed by all supervisors of a student who has multiple jobs on campus and is planning to work a normal work schedule of more than 30 hours per week. Talk to your student employees about this and find out if they have other job/s on campus. In this case, each department will be charged a prorated amount of FICA tax (Social Security and Medicare taxes).

*If a student worker will only, on a *rare* occasion, work more than 30 hours per week, this would **not** be considered a "normal work schedule." For example, if a student must work extra hours for a given pay period because another student worker is sick or some other unforeseen event occurs, that would **not** be considered a "normal work schedule" of more than 30 hours. If this happens, please notify the student payroll office that this is a one-time occurrence.

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Please complete all of the following information:

Indicate the time frame over which this student will have a normal work schedule of more than 30 hours per week (60 hours per pay period).

Begin Date: _____ End Date: _____

Cannot be later than the last date prior to the start of fall term.

NOTE: FICA will be withheld from this student's pay (and a matching percent [7.65%] charged to your cost center) until after the pay period in which this end date occurs. Please make this date as accurate as possible and only for the time frame for which the student will work >30 hrs/per week.

Student's Name:_____

Last Name **First Name**

Tech ID # _____

Department:_____ Cost Center Number: _____

Supervisor's Name (please print): _____

Approval **Signature** (**person in charge of budget**): _____

Date Signed: _____

IMPORTANT NOTE: Please contact the Student Payroll office if the circumstances of this individual's employment change or if you have any questions regarding this form.

The information collected on this form will be used by hiring departments, business and human resources to determine tax liability and to comply with United States tax laws and may be made available to other government officials as authorized by law.