# New Student Employee Check-In Procedures

## Department/Supervisor Responsibilities

### Complete BEFORE employee’s first day:

- □ ➤ Notify employee of their start date and instruct the student to bring proper identification documents for the I-9.  
  **Remember that employees are also required to show their original Social Security card.**
- □ ➤ Complete the [Student Employee Position Offer (SEPO)](#) and have student sign to accept.
- □ ➤ Send the completed and signed SEPO to the Student Employment Office through Cherwell and ensure that the student has visited to complete all required hire paperwork as well as the required orientation.
- □ ➤ Ensure employee reviews [MyLeave Guide](#) and understands how to enter time.
- □ ➤ Ensure employee reviews the [Student Employment Handbook](#).

### Complete with 60 days of hire:

Ensure that employee has taken all required trainings within 60 days of hire:

- ❖  Information Security Awareness
- ❖  Discrimination and Sexual Misconduct
- ❖  Fiscal Code of Ethics
- ❖  Conflict of Interest Disclosure Survey

If the student is working in multiple positions on campus, instruct them to work with all supervisors to complete the [Multiple Positions Disclosure Form](#).

## Student Employee Responsibilities

### Complete BEFORE beginning to work:

- □ ➤ Work with your supervisor and sign your Student Employee Position Offer (SEPO) to accept your position.

****Once you have completed the above steps, within 5-7 business days you should have access to the CU Resources tab within the [MyUCCSPortal](#).****

- □ ➤ Set up direct deposit using your MyUCCSPortal. Click on [CU Resources > Paychecks > Direct Deposit](#).
- □ ➤ Make your W-4 selections within 7 days in the MyUCCSPortal. Click on [CU Resources > Paychecks > W-4](#).
- □ ➤ Review Using [MyLeave Guide](#).
- □ ➤ Review the [Student Employment Handbook](#).
- □ ➤ Complete the [Student Employee Entrance Survey](#) (optional).

### Complete within 60 days of hire:

Complete all required trainings within 60 days of hire:

- ❖  Information Security Awareness
- ❖  Discrimination and Sexual Misconduct
- ❖  Fiscal Code of Ethics
- ❖  Conflict of Interest Disclosure Survey

If working with multiple positions on campus, work with all supervisors to complete the [Multiple Positions Disclosure Form](#).

### Other department specific action items:

**PURSUANT TO FEDERAL LAW, ALL PAPERWORK MUST BE COMPLETE OR STUDENT EMPLOYEE WILL NOT BE ENTERED INTO THE SYSTEM AND IS NOT ELIGIBLE TO WORK.**
Certification of Completion and Electronic Timekeeping

Employee Agreement

Under the terms of the Electronic Signatures in Global and National Commerce Act, an electronic signature may be used in place of a written one. I understand that submitting my time in MyLeave constitutes an electronic signature. Further, I hereby agree that each time I electronically submit my time record in the MyLeave timekeeping system I am agreeing to the following statement:

I certify (1) The hours and minutes shown in MyLeave are a complete and accurate record of time worked each day and for the reporting period. All leave taken and/or overtime earned or taken as compensatory time was reported and approved by my supervisor. (2) The Speedtype identified in the HR system is appropriate to pay these hours, and the percentage of time attributed to each reflects the actual effort expended on the project(s) specific to the Speedtype listed. (3) Student employee is enrolled in the proper number of credit hours, pursuant to campus specific student employment guidelines.

I understand my job classification is eligible for overtime and/or compensatory time payment. These payments will be made at the rate of one and one-half times my hourly rate. I agree to work overtime or compensatory time only with advance approval of my supervisor. Failure to receive advance approval for overtime or compensatory time worked may result in a corrective or disciplinary action which may include termination of University employment.

I understand that logging into the MyLeave system using my campus ID and password uniquely identifies me to the system. I will not allow anyone else to use my campus ID, and will not intentionally disclose my password to anyone (except as required for official university business). I understand that allowing someone else to submit my time can result in a corrective or disciplinary action which may include termination of University employment.

This agreement shall remain in effect for the duration of my employment with the University of Colorado Colorado Springs.

Employee Name __________________________ Signature ___________________________ Date _________

Supervisor Agreement

Under the terms of the Electronic Signatures in Global and National Commerce Act, an electronic signature may be used in place of a written one. I understand that approving my employees’ time records in MyLeave constitutes an electronic signature.

Further, I understand that approving the reported time for any work-study/hourly student is intended to serve as certification by the supervisor that the student(s) understand their job classification is eligible for overtime and/or compensatory time payment. These payments will be made at the rate of one and one-half times his/her hourly rate. The student(s) agrees to work overtime or compensatory time only with advance approval from their supervisor. Failure to receive advance approval for overtime or compensatory time worked may result in a corrective or disciplinary action which may include termination of University employment.

I hereby agree that each time I electronically approve any employee’s time record in the MyLeave timekeeping system I am agreeing to the following statement:

I certify hours and minutes shown in a student’s approved time records in MyLeave are a complete and accurate record of time worked each day and for the reporting period. All leave taken and/or overtime earned or taken as compensatory time was reported, in accordance with work-study and university regulations.

The Speedtype identified by the HR system is appropriate to pay these hours, and the percentage of time attributed to each reflects the actual effort expended on the project(s) specific to the Speedtype listed.

This agreement shall remain in effect for the duration of my employment with the University of Colorado Colorado Springs.

Supervisor Name __________________________ Signature ___________________________ Date _________

**This form should be filed in each department’s student employee personnel file.**