

Instructional Student Assistant Time Voucher

Payroll, SBS-Rm 353
Arcata, CA 95521-8299
(707) 826-3512
(707) 826-4917 FAX

This form must be completed by the student and reviewed by the department prior to submitting to Payroll each month.

PAY PERIOD:

March 01 to
March 31

MONTH YEAR

CMS CHART FIELD STRING

ACCT. # FUND DEPT. PROGRAM CLASS PROJECT

Employee Section:

Undergraduate Student Graduate Student

* Number of HSU units currently enrolled in this semester

EMPLOYEE'S LEGAL NAME - (TYPE OR PRINT CLEARLY)

Grid for legal name

LAST, FIRST, MIDDLE INITIAL, CONTACT EMAIL, CONTACT PHONE

EMPLOYEE IDENTIFICATION NUMBER

*** Please review section 5 on page 2 for this certification**

I CERTIFY THE FOLLOWING:

- A) I have worked the hours recorded below.
B) I have indicated my work in other departments to the right, or selected "NO" to working multiple positions.
C) I understand that retirement, Social Security, Medicare, Federal and State taxes, if applicable, will be deducted from this payment.
D) My signature below indicates I have met all of these certification items.

FOR MULTIPLE POSITIONS: During this pay period have you worked in any other paid positions for HSU, the CSU, or the State of California? If so, specify below.
[] NO [] YES
Other Dept 1
Other Dept 2

EMPLOYEE'S SIGNATURE DATE

Table with columns: Enter Sun., Dates Sat., Sunday, Monday, Tuesday, Wed, Thursday, Friday, Saturday, Totals. Rows for weekly hours and a Total row.

Department Section:

PAY PERIOD TOTAL HOURS X HOURLY PAY RATE = PAY PERIOD GROSS EARNINGS

Department must verify accuracy of all hourly, rate, and earnings calculations.

EMPLOYER INFORMATION

(TYPE OR PRINT CLEARLY)

DEPARTMENT'S NAME

SUPERVISOR'S NAME DEPARTMENT ADMINISTRATOR'S NAME

ATTENDANCE CLERK'S NAME PHONE NUMBER FAX NUMBER

I CERTIFY: A) The hours reported above are authorized and correct. B) Any hours worked in excess of 20 hours per week by this student were worked in accordance with State Policy governing student employees. C) The work was performed satisfactorily. D) Sufficient funds are available for payment of this voucher. E) My signature authorization card is on file in the HSU Payroll Office.

SIGNATURE OF IMMEDIATE SUPERVISOR DATE

DEPARTMENT ADMINISTRATOR'S SIGNATURE DATE

MINUTES = TENTHS
1 - 5 .0
6 - 11 .1
12 - 17 .2
18 - 23 .3
24 - 29 .4
30 - 35 .5
36 - 41 .6
42 - 47 .7
48 - 53 .8
54 - 59 .9
Reference PIMS Section 3.50

Information for Completion of Instructional Student Assistant Time Voucher

1) INSTRUCTIONAL STUDENT ASSISTANT (ISA) EMPLOYMENT POLICY

For campus policy regarding employment as an ISA, contact the department or departments which have employed you to perform this work.

2) EARS, SOCIAL SECURITY, AND W-2 INFORMATION

New employees must complete the new employee packet in the Human Resources Office (Siemens Hall 211). Payment CANNOT BE MADE until the forms listed above are on file in the Payroll and Human Resources Offices. The Employee Action Request (EAR) Form must reflect your PERMANENT MAILING ADDRESS as all W-2 forms will be mailed to this address by January 31st each year. You will receive only one W-2, reflecting ALL State of California wages. The State Controller's Office will charge a fee of \$8.50 to process a duplicate W-2 form.

Any employee who claims W4E status (exempt from taxes) MUST complete an EAR form each January or tax status will automatically revert to single with zero dependents.

To update any information (i.e. name, address, tax and marital status, birthdate, social security number, demographic profile information, and/or payroll designee) a new EAR form must be filed. Updating these items on other University forms WILL NOT update the information in the Human Resources and Payroll Offices.

The name shown on the time voucher must be EXACTLY as shown on the employee Social Security Card and EAR Form or pay will be delayed. All employees must have a Social Security number, unique to their person, in order to be paid by the State of California. To apply for OR make changes to a Social Security card, contact the regional Social Security Office.

3) WARRANT MAILING, UNIVERSITY DEBTS, & SALARY ADVANCES

Salary warrants will not be mailed for employee convenience per the State Accounting Manual (SAM 8580.2). Warrants may be mailed if payday occurs during semester break, summer vacation & other approved non-recurring conditions. In order to have warrants mailed, a mail card must be completed at the Payroll Office in advance of the payday.

If any monies are due the University the debt(s) will be deducted & an additional \$10.00 Administration Fee will be assessed prior to mailing. (Authorized per SAM 8776.7, Education Code 89700, Title V 41800, BP 83-21).

Pay advances are granted ONLY in cases of serious, unforeseen hardship per SAM 8595. Forms to request an advance are available in the Payroll Office and must be approved by the AVP of Business Services.

4) TIME VOUCHER COMPLETION & SUBMISSION

A separate time voucher must be completed for each hourly rate, unit, department or division where work occurred. Student employees must contact each employing department to determine deadlines for submission of vouchers. Departments must submit pay vouchers & attendance reports to Payroll on Due Dates for pay to be received on a timely basis. **STATE LAW PROHIBITS ESTIMATING AND PROJECTING HOURS.**

Incomplete or erroneous vouchers will be returned to departments & may result in delayed pay.

Vouchers must be completed in ink or typed. Time vouchers must have original signatures of supervisor and administrator, FAX copies cannot be accepted or processed. A signature authorization card must be on file in Payroll for both the supervisor and administrator signing this voucher.

5) INSTRUCTIONAL STUDENT ASSISTANT WORK WEEK

Instructional Student Assistant employees may work a maximum of 20 hours per week when school is IN session & 40 hours per week when school is NOT in session. These maximums are not limited to Instructional Student Assistant hours - they apply to ALL student employment paid by the State of California. The Work Week begins 12:01 a.m. Sunday and concludes 12:00 a.m. Saturday.

6) JOB INCURRED ACCIDENT OR ILLNESS

An on-the-job accident or illness MUST be reported to your supervisor immediately. The supervisor MUST submit an accident report (STD 620 Form) and Employee Claim Form (DWC1 Form) to the University Human Resources Office within 24 hours of the accident or illness.

7) PAY PERIODS, PAYDAY, PAYROLL DEADLINES

Below are the inclusive pay period dates, paydays and department deadlines when time vouchers are due in the Payroll Office. Reference SAM 8512.

Pay warrants are available on payday at the Cashiers Office, SBS Bldg., Room 285. Identification MUST be presented before warrant can be released.

	PAY PERIOD	INCLUSIVE DATES	DUE DATE	PAYDAY
2017	JULY	JULY 1 to AUGUST 1	AUG 02 by 5 PM	AUGUST 15
	AUGUST	AUG 2 to AUGUST 31	SEPTEMBER 1 by 5 PM	SEPTEMBER 15
	SEPTEMBER	SEPTEMBER 1 to SEPT 30	OCTOBER 1 by 5 PM	OCTOBER 16
	OCTOBER	OCTOBER 1 to OCTOBER 31	NOVEMBER 2 by 5 PM	NOVEMBER 15
	NOVEMBER	NOVEMBER 1 to NOV 30	DECEMBER 2 by 5 PM	DECEMBER 15
	DECEMBER	DEC 1 to DECEMBER 31	JANUARY 4 by 5 PM	JANUARY 16

2018	JANUARY	JANUARY 1 to JANUARY 30	FEBRUARY 1 by 5 PM	FEBRUARY 15
	FEBRUARY	JAN 31 to FEBRUARY 28	MARCH 2 by 5 PM	MARCH 15
	MARCH	MARCH 1 to MARCH 31	APRIL 1 by 5 PM	APRIL 16
	APRIL	APRIL 1 to APRIL 30	MAY 2 by 5 PM	MAY 15
	MAY	MAY 1 to MAY 30	JUNE 1 by 5 PM	JUNE 15
	JUNE	MAY 31 to JUNE 30	JULY 1 by 5 PM	JULY 16
	JULY	JULY 1 to JULY 31	AUGUST 2 by 5 PM	AUGUST 15
	AUGUST	AUGUST 1 to AUGUST 30	SEPTEMBER 1 by 5 PM	SEPTEMBER 14
	SEPTEMBER	AUG 31 to SEPTEMBER 30	OCTOBER 1 by 5 PM	OCTOBER 15
	OCTOBER	OCTOBER 1 to OCTOBER 30	NOVEMBER 1 by 5 PM	NOVEMBER 15
	NOVEMBER	OCT 31 to NOVEMBER 29	DECEMBER 1 by 5 PM	DECEMBER 14
	DECEMBER	NOV 30 to DECEMBER 31	JANUARY 2 by 5 PM	JANUARY 15

2019	JANUARY	JANUARY 1 to JANUARY 30	JANUARY 31 by 5 PM	FEBRUARY 15
	FEBRUARY	JAN 31 to FEBRUARY 28	MARCH 1 by 5 PM	MARCH 15
	MARCH	MARCH 1 to MARCH 31	APRIL 1 by 5 PM	APRIL 15
	APRIL	APRIL 1 to APRIL 30	MAY 1 by 5 PM	MAY 15
	MAY	MAY 1 to MAY 30	MAY 31 by 5 PM	JUNE 14
	JUNE	MAY 31 to JUNE 30	JULY 1 by 5 PM	JULY 15
	JULY	JULY 1 to JULY 30	JULY 31 by 5 PM	AUGUST 15
	AUGUST	JULY 31 to AUGUST 29	AUGUST 30 by 5 PM	SEPTEMBER 16
	SEPTEMBER	AUG 30 to SEPTEMBER 30	OCTOBER 1 by 5 PM	OCTOBER 15
	OCTOBER	OCTOBER 1 to OCTOBER 30	OCTOBER 31 by 5 PM	NOVEMBER 15
	NOVEMBER	OCT 31 to NOVEMBER 30	DECEMBER 2 by 5 PM	DECEMBER 16
	DECEMBER	DEC 1 to DECEMBER 31	JANUARY 2 by 5 PM	JANUARY 15