

# Bridge 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:

May 31 to  
June 30, 2018

MONTH			YEAR		

## CMS CHART FIELD STRING

ACCT. #	FUND	DEPT.	PROGRAM	CLASS	PROJECT

## Employee Section:

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

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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 completed and submitted an Employee Information form (105) and Employee Action Request (EAR) Form 686 and SSA - Form 1945 prior to working these hours.
- B) I was enrolled for the required units as a student at HSU during spring semester and intend to enroll during Fall Semester.
- C) I have worked the hours recorded below and have indicated if I worked in "multiple positions" with other departments (to the right).
- D) I understand that retirement, Social Security, Medicare, Federal and State taxes, if applicable, will be deducted from this payment.
- E) My signature below indicates I have met all of these certification items.

See Item 4 on page 2 for information on multiple positions..

### 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 (Last Day worked in Period)

Enter Sun.	Dates Sat.	Sunday	Monday	Tuesday	Wed	Thursday	Friday	Saturday	Totals
<b>Total</b>									<input type="text"/>

## Department Section:

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

DEPARTMENT TO COMPLETE ALL ITEMS BELOW

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) The work was performed satisfactorily. C) Sufficient funds are available for payment of this voucher. D) 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 Student Assistant Time Voucher

## 1) STUDENT EMPLOYMENT POLICY

For campus policy regarding employment as a Student Assistant employee, contact the Financial Aid Office and refer to the Humboldt State University Student Employee Personnel Policy. Copies available in the Human Resources Office, Siemens Hall(SH) 211.

## 2) SPAR, SOCIAL SECURITY, W-2 INFORMATION

New Student employees must complete SPAR and I-9 forms in their employing department. Payment CANNOT BE MADE until forms are on file in the Payroll & Human Resources Offices. SPAR Form should reflect PERMANENT ADDRESS as W-2 will be mailed to this address annually each January 31. You will receive only one W-2 reflecting ALL State of California Wages. **The State Controller will charge \$8.50 to process a duplicate W-2 Form!** Any employee who claims W4E status (exempt from taxes), MUST complete a SPAR Form each January or tax status will revert automatically to single zero.

To update any SPAR information, i.e. name, address, tax & marital status, birth date, social security number, ethnic identification or payroll designee, a new SPAR Form must be filed. Correcting this information on other University forms WILL NOT update information in Payroll and Human Resources.

Name shown on time voucher must be EXACTLY as shown on Social Security Card and SPAR Form or pay will be delayed. All employees must have a Social Security number to be paid by the State of California. To apply for or change a Social Security card contact the 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. A mail card must be completed at the Payroll Office prior in order to have warrants mailed.

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) STUDENT ASSISTANT WORK WEEK

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 Student Assistant hours - they apply to ALL 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 dead- lines 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. Student ID MUST be presented before warrant can be released.

	PAY PERIOD	INCLUSIVE DATES	DUE DATE	PAYDAY
2017	JULY	JULY 1 to AUGUST 1	AUGUST 2 by 5 PM	AUGUST 15
	AUGUST	AUGUST 2 to AUGUST 31	SEPTEMBER 1 by 5 PM	SEPTEMBER 15
2018	SEPTEMBER	SEPT 1 to SEPTEMBER 30	OCTOBER 1 by 5 PM	OCTOBER 16
	OCTOBER	OCTOBER 1 to OCTOBER 31	NOVEMBER 2 by 5 PM	NOVEMBER 15
2019	NOVEMBER	NOV 01 to NOVEMBER 30	DECEMBER 2 by 5 PM	DECEMBER 15
	DECEMBER	DEC 1 to DECEMBER 31	JANUARY 4 by 5 PM	JANUARY 16

2020	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
2021	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
2022	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
2023	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
2024	SEPTEMBER	AUG 31 to SEPTEMBER 30	OCTOBER 1 by 5 PM	OCTOBER 15
	OCTOBER	OCTOBER 1 TO OCTOBER 30	NOVEMBER 1 by 5PM	NOVEMBER 15
2025	NOVEMBER	OCT 31 to NOVEMBER 29	DECEMBER 1 by 5PM	DECEMBER 14
	DECEMBER	NOV 30 to DECEMBER 31	JANUARY 2 by 5 PM	JANUARY 15

2026	JANUARY	JAN 1 to JANUARY 30	JANUARY 31 by 5 PM	FEBRUARY 15
	FEBRUARY	JAN 31 to FEBRUARY 28	MARCH 1 by 5 PM	MARCH 15
2027	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
2028	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
2029	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
2030	SEPTEMBER	AUG 30 to SEPTEMBER 30	OCTOBER 1 by 5 PM	OCTOBER 15
	OCTOBER	OCT 1 to OCTOBER 30	OCTOBER 31 by 5 PM	NOVEMBER 15
2031	NOVEMBER	OCTOBER 31 to NOV 30	DECEMBER 2 by 5 PM	DECEMBER 16
	DECEMBER	DEC 1 to DECEMBER 31	JANUARY 2 by 5 PM	JANUARY 15