NORCO COLLEGE

REHIRE
EMPLOYEE INFORMATION FORM

(PLEASE TYPE FORM)

Academic Year 2022/2023

I. Personal Information

1. Student's Name (Exactly as Written on Social Security Card)

Last:_____ First:_____ Middle I: _____

2. Social Security #:_____ 3. Student ID #: _____

☐ Check here if address is different than what we had last academic year.

3. Street Address:_____ City:_____ State:___ Zip Code: _____
Street Address or P.O. Box

4. Telephone Number: _____

5. E-Mail Address:_____

6. **Emergency Contact**: Last Name:_____ First Name:_____
(Mandatory)

Relationship to you:_____ Daytime Phone Number_____

7. Name of department/hiring site:_____

8. Name of hiring supervisor:_____

II. Please read and check off each agreement.

☐ *I understand I must maintain a minimum half-time enrollment (6.0 units for Fall/ Spring, and 3.0 units for Summer and Winter).*

☐ *I understand I must maintain a minimum 2.0 cumulative GPA.*

☐ *I understand I must have Norco College listed as my designated home college with Admissions and Records.*

☐ *I understand that if I fall below half-time enrollment and/ or my cumulative GPA falls below a 2.0,* ***I may be dismissed from my position****.*

☐ *I understand that the hiring department/ site or its funding is subject to change.*

☐ *I understand that I am limited to working no more than 8.0 hour per day, and no more than 20 hours per week.*

☐ *I understand that I cannot work until ALL paperwork is completed and processed by the Student Employment Office and written notification has been sent to my supervisor. My supervisor will contact me when my employment can begin. If I work prior to my employment authorization I may not be paid on time.*

III. Sign and Date

I certify that all of the above information is true and accurate to the best of my knowledge.

Employee's Signature:_____ **Date:**_____

Please sign form and email form to carmen.parra@norcocollege.edu