

Northwestern | NORRIS UNIVERSITY CENTER

2019-20 Norris Student Employee Policies

Introduction

- These employment policies exist to set clear expectations for staff and supervisors working for Norris University Center. Each staff member is expected to read these policies and sign the acknowledgement form. Violations of these policies may lead to disciplinary action.
- The policies detailed in this document are Norris wide and apply to all Norris student employees. Consult with your supervisor for area specific policies and procedures.
- These policies will be reviewed and updated periodically.

Conduct

- As a student staff member, you represent Norris and Northwestern University. Professional behavior is expected at all times.
 - All members of the Northwestern Community, including students, staff, faculty, clients, and guests will be treated with respect, dignity, and a pleasant, friendly attitude.
 - If you have an issue with a co-worker, address the issue with your supervisor or at a staff meeting. Disagreements should never happen in front of clients or guests.
 - If you encounter a difficult situation with a client or guest, remain polite. Involve a supervisor, CM, or professional staff member to help resolve the situation.
 - Yelling or foul language of any kind will not be tolerated.
- Norris student staff members must follow the strictest NU campus policy regarding use, possession, sale, purchase, manufacturing, and dispensing of alcohol, drugs, and drug paraphernalia, and are prohibited from being under the influence of alcohol or any drug during any work shift. Violation will result in termination.
- Students taking prescription or over-the-counter medications that cause impairment should notify their supervisor so as to not be assigned potentially dangerous tasks.
- Whenever possible, plan your meals around your work schedule. Do not eat while you are posted at a public location such as one of the SOFO windows or a reception desk. Consult with your supervisor about if, where, and when eating is acceptable during a shift.

Dress Code

- Student staff members are expected to be in uniform while on shift. Uniforms consist of:
 - Any Norris polo shirt, any Norris t-shirt, or your own Northwestern or purple shirt
 - Khaki pants, dress pants, or nice jeans (no rips)
 - Shorts or skirt, provided the bottom hem extends past your fingertips when your hands are at your side
 - Clean and wrinkle-free clothing
 - Closed-toe shoes
 - Name badge with your correct name
- No sweatpants or athletic leggings (in lieu of pants) are permitted; leggings must be opaque and a solid, dark color.
- No active wear or sleep wear is permitted.
- No underwear should be visible.
- No hats or caps can be worn while on shift, except when working outdoor events, Norris at Night, or Exam Relief breakfast.
- Additional dress code requirements may be specified by your area supervisor, including protective gear such as gloves, goggles, masks, earplugs, etc.
- All Norris student staff members will receive one Norris shirt (two shirts if required for your position) and a name badge
- When exceptions to this policy are necessary, requiring special attire for certain tasks or events, your supervisor will notify you on a case-by-case (or location-by-location) basis. This includes theatrical blacks, painting clothes, casual days, and formal events.
- If you have questions about appropriate dress code, consult with your supervisor.

Attendance

- Student staff members are responsible to know their work schedules and to report on time, ready to work. Training on the use of Shift Planning will be provided by your supervisor. Each area has procedures for shift trades and substitutions.
- Staff members are responsible to learn their area's procedures for notification when they are running late for a shift or calling in to report illness, etc.
- The time clock in Norris is located near the Center Desk, across from the freight elevator. When working within the Norris University Center, student staff members are expected to swipe in with their Wildcard directly before their shifts begin, and report immediately to their work site. At the end of a shift, proceed immediately to the time clock to swipe out.
- If your department is located outside of the main building, or if you are working a shift offsite, you must manually enter your beginning and end times directly into the Kronos Website. If this applies to you, please check with your supervisor for further instruction.
- Consult with your supervisors for "Missed Punch" procedures for your area.
- Student staff members are responsible for reporting their work hours (via swiping in/out or Kronos entry) and for verifying that their timecards are accurate and complete.
- Tardiness and missed shifts may lead to disciplinary action.

Norris Property and Security

- Staff members may be issued Norris property (radios, keys, electronic equipment) in order to perform their duties. Adhere to your area's procedures for checking Norris property in and out.
- You are responsible for Norris property while it is in your position and can be held liable for misuse, damage, and loss of property.
- Norris property is only intended for use in accordance with your area's procedures and guidelines. Do not use Norris property for personal purposes.
- Report damage to or loss of Norris property to your supervisor immediately.
- If issued keys or provided Wildcard access to card reading door locks in support of your duties, please ensure that secure areas are relocked after accessing them. Never open doors for anyone you don't know, or who doesn't have a legitimate reason to be there.

Personal Device Use

- Student staff members working in public areas or interacting with clients may not use personal phones/tablets/laptops during the first hour of their shift, and may not wear headphones or earbuds at any time during their shift. Some public/client-facing areas may prohibit use of personal devices at any time, per area supervisor's discretion.
- Student staff members standing by in the staff room may use personal devices and earbuds once work is complete.
- Students supervising a simple meeting or reception may use personal devices once setup is complete and the event is underway.
- At no point during any shift should a student staff member wear more than one earbud at a time. It is always necessary to be able to hear a radio call or a client request for assistance.
- Norris is not responsible for lost, stolen, or damaged personal devices that are brought to work.

Communication

- Norris student staff members are the face of Norris. Greet our guests with a polite, friendly attitude. Smile. Yelling or foul language of any kind is not acceptable.
- If addressing a client or guest question, request, or issue: listen actively, get and provide detailed information. If you need to consult with a supervisor on the issue, communicate with the guest that you are communicating the issue and when and how you will get back to them.
- If your job requires the use of a 2-way Radio, pick up the radio from the area designated by your Manager at the beginning of your shift, and return it at the end of your shift. Radios are for work related conversations only. Conversations should be kept brief and professional. Please wait until previous conversations have ended before attempting to speak. Please utilize the following format when communicating on the radio:
 - (Your Name or Department) to (Name or Department you need to contact).
 - Go For (Your Name or Department)
 - (Brief Message/Description/Question)
 - (Brief Reply, etc.)

Safety

- Learn and adhere to safe work practices, including:
 - Never use equipment that you have not been trained to use.
 - Lift with your legs, not your back.
 - Report dangerous conditions to the CM or a supervisor immediately.
 - Report any injury to yourself, a co-worker, or a guest to the CM or supervisor immediately.
 - Learn Norris' and your department's Emergency Procedures. Know your role and safe practices for emergency situations.

ACKNOWLEDGEMENT

I the undersigned Norris student employee have read and understand the above Norris Student Employee Policies and agree to comply with the standards and requirements contained therein, and further understand that violation of these policies may lead to disciplinary action.

Employee Name

NU ID Number

Employee Signature

Date

Type of Request: New Hire Rehire Address Change Name Change

PERSONAL INFORMATION

Legal Name: Last: _____ First: _____ Middle: _____		Northwestern ID Number: <i>(if available)</i>
Former Legal Name: <i>(if requesting a Name Change; a copy of your Social Security Card showing your updated Legal Name must be attached)</i>		
Birthdate: <i>(MM/DD/YYYY)</i>	Social Security Number: <i>(new hires only)</i>	National Provider Identifier/NPI: <i>(Feinberg faculty physicians only)</i>
Marital Status: <input type="checkbox"/> Single <input type="checkbox"/> Married	I identify my gender as: <input type="checkbox"/> Female <input type="checkbox"/> Male	Northwestern University understands that the binary gender values do not reflect the inclusive nature of the community at large, but unfortunately external impacts have required this field to be limited. Please select the option with which you feel most comfortable.
Country of Citizenship:	Visa/Residency: <input type="checkbox"/> F1 <input type="checkbox"/> J1 <input type="checkbox"/> H1 <input type="checkbox"/> Other <input type="checkbox"/> U.S. Permanent Resident <i>(not a U.S. citizen)</i>	
In which state will you be performing work for Northwestern?	Are you interested in contributing to the Northwestern University Voluntary Savings Plan, a 403b pre-tax retirement savings plan? <input type="checkbox"/> Yes <input type="checkbox"/> No	

Note: New hires must complete Form I-9 online (northwestern.i9servicecenter.com) by the end of their first day of work and provide required documentation to be employed and paid. If you are not a U.S. citizen or permanent resident, contact payroll@northwestern.edu to complete information in the Foreign National Information System (FNIS).

CONTACT INFORMATION **Note:** Your Form W-2 is sent to your Local Home Address; update your contact information anytime at www.northwestern.edu/myhr.

Local Home Address		Secondary Mailing Address	
Is this address part of on-campus student housing? <input type="checkbox"/> Yes <input type="checkbox"/> No		<i>(optional; please enter if your Local Home Address is unknown)</i>	
Number & Street:	Apt #:	Number & Street:	Apt #:
City:	State:	City:	State:
ZIP/Postal Code:	Country:	ZIP/Postal Code:	Country:
Work Phone Number <i>(indicate main office/department number if you do not know your direct extension):</i>			
Primary Home/Cell Phone Number:		Secondary Home/Cell Number: <i>(optional)</i>	
Personal Email Address:			

DEMOGRAPHIC DATA

Are you Hispanic or Latino? <input type="checkbox"/> Yes <input type="checkbox"/> No	What is your race? <i>(select one or more)</i>		
	<input type="checkbox"/> American Indian or Alaska Native	<input type="checkbox"/> Black or African American	<input type="checkbox"/> White
	<input type="checkbox"/> Asian	<input type="checkbox"/> Native Hawaiian or Other Pacific Islander	

Non-Discrimination Policies: Northwestern University is committed to providing an environment free of discrimination, harassment, and retaliation. Please visit the following websites to learn more about Northwestern's non-discrimination policies and complaint processes: www.northwestern.edu/equal-opportunity-access and www.northwestern.edu/sexual-harassment.

Signature: _____	Date: _____
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FOR TEMPORARY EMPLOYEES ONLY – to be completed by the hiring department

Northwestern Student Status: <input type="checkbox"/> Student <input type="checkbox"/> Non-Student		Does this assignment require driving? <input type="checkbox"/> Yes <input type="checkbox"/> No			
		Does this assignment require access to Northwestern Memorial Hospital records? <input type="checkbox"/> Yes <input type="checkbox"/> No			
Assignment Begin Date:	Assignment End Date: <i>(if known)</i>	HR Dept ID#:	Job Code:	Hourly Rate:	Time Entry: <input type="checkbox"/> Swiper <input type="checkbox"/> Non-Swiper
Fund:	FN Dept:	Project:	Activity:	Chartfield1:	Account:
Supervisor Name:	Supervisor ID:	Supervisor Position #:	Supervisor Phone:	Supervisor Signature:	

Administrators: For temporary employees, review the hiring checklist and submission instructions at www.northwestern.edu/hr/temp hires. For all others, mail or bring the original form along with other relevant hire paperwork to HR Operations, 720 University Place, 2nd Floor, Evanston, IL 60208.

Form W-4 (2019)

Future developments. For the latest information about any future developments related to Form W-4, such as legislation enacted after it was published, go to www.irs.gov/FormW4.

Purpose. Complete Form W-4 so that your employer can withhold the correct federal income tax from your pay. Consider completing a new Form W-4 each year and when your personal or financial situation changes.

Exemption from withholding. You may claim exemption from withholding for 2019 if **both** of the following apply.

- For 2018 you had a right to a refund of **all** federal income tax withheld because you had **no** tax liability, **and**
- For 2019 you expect a refund of **all** federal income tax withheld because you expect to have **no** tax liability.

If you're exempt, complete **only** lines 1, 2, 3, 4, and 7 and sign the form to validate it. Your exemption for 2019 expires February 17, 2020. See Pub. 505, Tax Withholding and Estimated Tax, to learn more about whether you qualify for exemption from withholding.

General Instructions

If you aren't exempt, follow the rest of these instructions to determine the number of withholding allowances you should claim for withholding for 2019 and any additional amount of tax to have withheld. For regular wages, withholding must be based on allowances you claimed and may not be a flat amount or percentage of wages.

You can also use the calculator at www.irs.gov/W4App to determine your tax withholding more accurately. Consider

using this calculator if you have a more complicated tax situation, such as if you have a working spouse, more than one job, or a large amount of nonwage income not subject to withholding outside of your job. After your Form W-4 takes effect, you can also use this calculator to see how the amount of tax you're having withheld compares to your projected total tax for 2019. If you use the calculator, you don't need to complete any of the worksheets for Form W-4.

Note that if you have too much tax withheld, you will receive a refund when you file your tax return. If you have too little tax withheld, you will owe tax when you file your tax return, and you might owe a penalty.

Filers with multiple jobs or working spouses. If you have more than one job at a time, or if you're married filing jointly and your spouse is also working, read all of the instructions including the instructions for the Two-Earners/Multiple Jobs Worksheet before beginning.

Nonwage income. If you have a large amount of nonwage income not subject to withholding, such as interest or dividends, consider making estimated tax payments using Form 1040-ES, Estimated Tax for Individuals. Otherwise, you might owe additional tax. Or, you can use the Deductions, Adjustments, and Additional Income Worksheet on page 3 or the calculator at www.irs.gov/W4App to make sure you have enough tax withheld from your paycheck. If you have pension or annuity income, see Pub. 505 or use the calculator at www.irs.gov/W4App to find out if you should adjust your withholding on Form W-4 or W-4P.

Nonresident alien. If you're a nonresident alien, see Notice 1392, Supplemental Form W-4 Instructions for Nonresident Aliens, before completing this form.

Specific Instructions

Personal Allowances Worksheet

Complete this worksheet on page 3 first to determine the number of withholding allowances to claim.

Line C. Head of household please note: Generally, you may claim head of household filing status on your tax return only if you're unmarried and pay more than 50% of the costs of keeping up a home for yourself and a qualifying individual. See Pub. 501 for more information about filing status.

Line E. Child tax credit. When you file your tax return, you may be eligible to claim a child tax credit for each of your eligible children. To qualify, the child must be under age 17 as of December 31, must be your dependent who lives with you for more than half the year, and must have a valid social security number. To learn more about this credit, see Pub. 972, Child Tax Credit. To reduce the tax withheld from your pay by taking this credit into account, follow the instructions on line E of the worksheet. On the worksheet you will be asked about your total income. For this purpose, total income includes all of your wages and other income, including income earned by a spouse if you are filing a joint return.

Line F. Credit for other dependents. When you file your tax return, you may be eligible to claim a credit for other dependents for whom a child tax credit can't be claimed, such as a qualifying child who doesn't meet the age or social security number requirement for the child tax credit, or a qualifying relative. To learn more about this credit, see Pub. 972. To reduce the tax withheld from your pay by taking this credit into account, follow the instructions on line F of the worksheet. On the worksheet, you will be asked about your total income. For this purpose, total

----- Separate here and give Form W-4 to your employer. Keep the worksheet(s) for your records. -----

Form W-4 Department of the Treasury Internal Revenue Service	<h2 style="margin:0;">Employee's Withholding Allowance Certificate</h2> <p style="margin:0;">▶ Whether you're entitled to claim a certain number of allowances or exemption from withholding is subject to review by the IRS. Your employer may be required to send a copy of this form to the IRS.</p>	OMB No. 1545-0074 <h1 style="margin:0;">2019</h1>
1 Your first name and middle initial _____ Last name _____		2 Your social security number _____
Home address (number and street or rural route) _____		3 <input type="checkbox"/> Single <input type="checkbox"/> Married <input type="checkbox"/> Married, but withhold at higher Single rate. Note: If married filing separately, check "Married, but withhold at higher Single rate."
City or town, state, and ZIP code _____		4 If your last name differs from that shown on your social security card, check here. You must call 800-772-1213 for a replacement card. ▶ <input type="checkbox"/>
5 Total number of allowances you're claiming (from the applicable worksheet on the following pages)	5	
6 Additional amount, if any, you want withheld from each paycheck	6 \$	
7 I claim exemption from withholding for 2019, and I certify that I meet both of the following conditions for exemption. <ul style="list-style-type: none"> • Last year I had a right to a refund of all federal income tax withheld because I had no tax liability, and • This year I expect a refund of all federal income tax withheld because I expect to have no tax liability. If you meet both conditions, write "Exempt" here ▶		
Under penalties of perjury, I declare that I have examined this certificate and, to the best of my knowledge and belief, it is true, correct, and complete.		
Employee's signature (This form is not valid unless you sign it.) ▶		Date ▶
8 Employer's name and address (Employer: Complete boxes 8 and 10 if sending to IRS and complete boxes 8, 9, and 10 if sending to State Directory of New Hires.)		9 First date of employment
		10 Employer identification number (EIN)

income includes all of your wages and other income, including income earned by a spouse if you are filing a joint return.

Line G. Other credits. You may be able to reduce the tax withheld from your paycheck if you expect to claim other tax credits, such as tax credits for education (see Pub. 970). If you do so, your paycheck will be larger, but the amount of any refund that you receive when you file your tax return will be smaller. Follow the instructions for Worksheet 1-6 in Pub. 505 if you want to reduce your withholding to take these credits into account. Enter “-0-” on lines E and F if you use Worksheet 1-6.

Deductions, Adjustments, and Additional Income Worksheet

Complete this worksheet to determine if you’re able to reduce the tax withheld from your paycheck to account for your itemized deductions and other adjustments to income, such as IRA contributions. If you do so, your refund at the end of the year will be smaller, but your paycheck will be larger. You’re not required to complete this worksheet or reduce your withholding if you don’t wish to do so.

You can also use this worksheet to figure out how much to increase the tax withheld from your paycheck if you have a large amount of nonwage income not subject to withholding, such as interest or dividends.

Another option is to take these items into account and make your withholding more accurate by using the calculator at www.irs.gov/W4App. If you use the calculator, you don’t need to complete any of the worksheets for Form W-4.

Two-Earners/Multiple Jobs Worksheet

Complete this worksheet if you have more than one job at a time or are married filing jointly and have a working spouse. If you

don’t complete this worksheet, you might have too little tax withheld. If so, you will owe tax when you file your tax return and might be subject to a penalty.

Figure the total number of allowances you’re entitled to claim and any additional amount of tax to withhold on all jobs using worksheets from only one Form W-4. Claim all allowances on the W-4 that you or your spouse file for the highest paying job in your family and claim zero allowances on Forms W-4 filed for all other jobs. For example, if you earn \$60,000 per year and your spouse earns \$20,000, you should complete the worksheets to determine what to enter on lines 5 and 6 of your Form W-4, and your spouse should enter zero (“-0-”) on lines 5 and 6 of his or her Form W-4. See Pub. 505 for details.

Another option is to use the calculator at www.irs.gov/W4App to make your withholding more accurate.

Tip: If you have a working spouse and your incomes are similar, you can check the “Married, but withhold at higher Single rate” box instead of using this worksheet. If you choose this option, then each spouse should fill out the Personal Allowances Worksheet and check the “Married, but withhold at higher Single rate” box on Form W-4, but only one spouse should claim any allowances for credits or fill out the Deductions, Adjustments, and Additional Income Worksheet.

Instructions for Employer

Employees, do not complete box 8, 9, or 10. Your employer will complete these boxes if necessary.

New hire reporting. Employers are required by law to report new employees to a designated State Directory of New Hires. Employers may use Form W-4, boxes 8, 9,

and 10 to comply with the new hire reporting requirement for a newly hired employee. A newly hired employee is an employee who hasn’t previously been employed by the employer, or who was previously employed by the employer but has been separated from such prior employment for at least 60 consecutive days. Employers should contact the appropriate State Directory of New Hires to find out how to submit a copy of the completed Form W-4. For information and links to each designated State Directory of New Hires (including for U.S. territories), go to www.acf.hhs.gov/css/employers.

If an employer is sending a copy of Form W-4 to a designated State Directory of New Hires to comply with the new hire reporting requirement for a newly hired employee, complete boxes 8, 9, and 10 as follows.

Box 8. Enter the employer’s name and address. If the employer is sending a copy of this form to a State Directory of New Hires, enter the address where child support agencies should send income withholding orders.

Box 9. If the employer is sending a copy of this form to a State Directory of New Hires, enter the employee’s first date of employment, which is the date services for payment were first performed by the employee. If the employer rehired the employee after the employee had been separated from the employer’s service for at least 60 days, enter the rehire date.

Box 10. Enter the employer’s employer identification number (EIN).

Personal Allowances Worksheet (Keep for your records.)

A	Enter "1" for yourself	A	_____
B	Enter "1" if you will file as married filing jointly	B	_____
C	Enter "1" if you will file as head of household	C	_____
D	Enter "1" if: { <ul style="list-style-type: none"> • You're single, or married filing separately, and have only one job; or • You're married filing jointly, have only one job, and your spouse doesn't work; or • Your wages from a second job or your spouse's wages (or the total of both) are \$1,500 or less. }	D	_____
E	<p>Child tax credit. See Pub. 972, Child Tax Credit, for more information.</p> <ul style="list-style-type: none"> • If your total income will be less than \$71,201 (\$103,351 if married filing jointly), enter "4" for each eligible child. • If your total income will be from \$71,201 to \$179,050 (\$103,351 to \$345,850 if married filing jointly), enter "2" for each eligible child. • If your total income will be from \$179,051 to \$200,000 (\$345,851 to \$400,000 if married filing jointly), enter "1" for each eligible child. • If your total income will be higher than \$200,000 (\$400,000 if married filing jointly), enter "-0-" 	E	_____
F	<p>Credit for other dependents. See Pub. 972, Child Tax Credit, for more information.</p> <ul style="list-style-type: none"> • If your total income will be less than \$71,201 (\$103,351 if married filing jointly), enter "1" for each eligible dependent. • If your total income will be from \$71,201 to \$179,050 (\$103,351 to \$345,850 if married filing jointly), enter "1" for every two dependents (for example, "-0-" for one dependent, "1" if you have two or three dependents, and "2" if you have four dependents). • If your total income will be higher than \$179,050 (\$345,850 if married filing jointly), enter "-0-" 	F	_____
G	<p>Other credits. If you have other credits, see Worksheet 1-6 of Pub. 505 and enter the amount from that worksheet here. If you use Worksheet 1-6, enter "-0-" on lines E and F</p>	G	_____
H	Add lines A through G and enter the total here	H	_____

For accuracy, **complete all worksheets that apply.**

- If you plan to **itemize** or **claim adjustments to income** and want to reduce your withholding, or if you have a large amount of nonwage income not subject to withholding and want to increase your withholding, see the **Deductions, Adjustments, and Additional Income Worksheet** below.
- If you **have more than one job at a time** or are **married filing jointly and you and your spouse both work**, and the combined earnings from all jobs exceed \$53,000 (\$24,450 if married filing jointly), see the **Two-Earners/Multiple Jobs Worksheet** on page 4 to avoid having too little tax withheld.
- If **neither** of the above situations applies, **stop here** and enter the number from line H on line 5 of Form W-4 above.

Deductions, Adjustments, and Additional Income Worksheet

Note: Use this worksheet *only* if you plan to itemize deductions, claim certain adjustments to income, or have a large amount of nonwage income not subject to withholding.

1	Enter an estimate of your 2019 itemized deductions. These include qualifying home mortgage interest, charitable contributions, state and local taxes (up to \$10,000), and medical expenses in excess of 10% of your income. See Pub. 505 for details	1	\$ _____
2	Enter: { <ul style="list-style-type: none"> \$24,400 if you're married filing jointly or qualifying widow(er) \$18,350 if you're head of household \$12,200 if you're single or married filing separately }	2	\$ _____
3	Subtract line 2 from line 1. If zero or less, enter "-0-"	3	\$ _____
4	Enter an estimate of your 2019 adjustments to income, qualified business income deduction, and any additional standard deduction for age or blindness (see Pub. 505 for information about these items)	4	\$ _____
5	Add lines 3 and 4 and enter the total	5	\$ _____
6	Enter an estimate of your 2019 nonwage income not subject to withholding (such as dividends or interest)	6	\$ _____
7	Subtract line 6 from line 5. If zero, enter "-0-". If less than zero, enter the amount in parentheses	7	\$ _____
8	Divide the amount on line 7 by \$4,200 and enter the result here. If a negative amount, enter in parentheses. Drop any fraction	8	_____
9	Enter the number from the Personal Allowances Worksheet , line H, above	9	_____
10	Add lines 8 and 9 and enter the total here. If zero or less, enter "-0-". If you plan to use the Two-Earners/Multiple Jobs Worksheet , also enter this total on line 1 of that worksheet on page 4. Otherwise, stop here and enter this total on Form W-4, line 5, page 1	10	_____

Two-Earners/Multiple Jobs Worksheet

Note: Use this worksheet *only* if the instructions under line H from the **Personal Allowances Worksheet** direct you here.

- 1 Enter the number from the **Personal Allowances Worksheet**, line H, page 3 (or, if you used the **Deductions, Adjustments, and Additional Income Worksheet** on page 3, the number from line 10 of that worksheet) **1** _____
 - 2 Find the number in **Table 1** below that applies to the **LOWEST** paying job and enter it here. **However**, if you're married filing jointly and wages from the highest paying job are \$75,000 or less and the combined wages for you and your spouse are \$107,000 or less, don't enter more than "3" **2** _____
 - 3 If line 1 is **more than or equal to** line 2, subtract line 2 from line 1. Enter the result here (if zero, enter "-0-") and on Form W-4, line 5, page 1. **Do not** use the rest of this worksheet **3** _____
- Note:** If line 1 is **less than** line 2, enter "-0-" on Form W-4, line 5, page 1. Complete lines 4 through 9 below to figure the additional withholding amount necessary to avoid a year-end tax bill.
- 4 Enter the number from line 2 of this worksheet **4** _____
 - 5 Enter the number from line 1 of this worksheet **5** _____
 - 6 **Subtract** line 5 from line 4 **6** _____
 - 7 Find the amount in **Table 2** below that applies to the **HIGHEST** paying job and enter it here **7** \$ _____
 - 8 **Multiply** line 7 by line 6 and enter the result here. This is the additional annual withholding needed **8** \$ _____
 - 9 **Divide** line 8 by the number of pay periods remaining in 2019. For example, divide by 18 if you're paid every 2 weeks and you complete this form on a date in late April when there are 18 pay periods remaining in 2019. Enter the result here and on Form W-4, line 6, page 1. This is the additional amount to be withheld from each paycheck **9** \$ _____

Table 1				Table 2			
Married Filing Jointly		All Others		Married Filing Jointly		All Others	
If wages from LOWEST paying job are—	Enter on line 2 above	If wages from LOWEST paying job are—	Enter on line 2 above	If wages from HIGHEST paying job are—	Enter on line 7 above	If wages from HIGHEST paying job are—	Enter on line 7 above
\$0 - \$5,000	0	\$0 - \$7,000	0	\$0 - \$24,900	\$420	\$0 - \$7,200	\$420
5,001 - 9,500	1	7,001 - 13,000	1	24,901 - 84,450	500	7,201 - 36,975	500
9,501 - 19,500	2	13,001 - 27,500	2	84,451 - 173,900	910	36,976 - 81,700	910
19,501 - 35,000	3	27,501 - 32,000	3	173,901 - 326,950	1,000	81,701 - 158,225	1,000
35,001 - 40,000	4	32,001 - 40,000	4	326,951 - 413,700	1,330	158,226 - 201,600	1,330
40,001 - 46,000	5	40,001 - 60,000	5	413,701 - 617,850	1,450	201,601 - 507,800	1,450
46,001 - 55,000	6	60,001 - 75,000	6	617,851 and over	1,540	507,801 and over	1,540
55,001 - 60,000	7	75,001 - 85,000	7				
60,001 - 70,000	8	85,001 - 95,000	8				
70,001 - 75,000	9	95,001 - 100,000	9				
75,001 - 85,000	10	100,001 - 110,000	10				
85,001 - 95,000	11	110,001 - 115,000	11				
95,001 - 125,000	12	115,001 - 125,000	12				
125,001 - 155,000	13	125,001 - 135,000	13				
155,001 - 165,000	14	135,001 - 145,000	14				
165,001 - 175,000	15	145,001 - 160,000	15				
175,001 - 180,000	16	160,001 - 180,000	16				
180,001 - 195,000	17	180,001 and over	17				
195,001 - 205,000	18						
205,001 and over	19						

Privacy Act and Paperwork Reduction Act Notice. We ask for the information on this form to carry out the Internal Revenue laws of the United States. Internal Revenue Code sections 3402(f)(2) and 6109 and their regulations require you to provide this information; your employer uses it to determine your federal income tax withholding. Failure to provide a properly completed form will result in your being treated as a single person who claims no withholding allowances; providing fraudulent information may subject you to penalties. Routine uses of this information include giving it to the Department of Justice for civil and criminal litigation; to

cities, states, the District of Columbia, and U.S. commonwealths and possessions for use in administering their tax laws; and to the Department of Health and Human Services for use in the National Directory of New Hires. We may also disclose this information to other countries under a tax treaty, to federal and state agencies to enforce federal nontax criminal laws, or to federal law enforcement and intelligence agencies to combat terrorism.

You aren't required to provide the information requested on a form that's subject to the Paperwork Reduction Act unless the form displays a valid OMB control number. Books or records relating

to a form or its instructions must be retained as long as their contents may become material in the administration of any Internal Revenue law. Generally, tax returns and return information are confidential, as required by Code section 6103.

The average time and expenses required to complete and file this form will vary depending on individual circumstances. For estimated averages, see the instructions for your income tax return.

If you have suggestions for making this form simpler, we would be happy to hear from you. See the instructions for your income tax return.



Note: These instructions are written for employees to address withholding from wages. However, this form can also be completed and submitted to a payor if an agreement was made to voluntarily withhold Illinois Income tax from other (non-wage) Illinois income.

Who must complete Form IL-W-4?

If you are an employee, you must complete this form so your employer can withhold the correct amount of Illinois Income Tax from your pay. The amount withheld from your pay depends, in part, on the number of allowances you claim on this form.

Even if you claimed exemption from withholding on your federal Form W-4, U.S. Employee's Withholding Allowance Certificate, because you do not expect to owe any federal income tax, you may be required to have Illinois Income Tax withheld from your pay (see Publication 130, Who is Required to Withhold Illinois Income Tax). If you are claiming exempt status from Illinois withholding, you must check the exempt status box on Form IL-W-4 and sign and date the certificate. Do not complete Lines 1 through 3.

If you are a resident of Iowa, Kentucky, Michigan, or Wisconsin, or a military spouse, see Form W-5-NR, Employees Statement of Nonresidence in Illinois, to determine if you are exempt.

Note If you do not file a completed Form IL-W-4 with your employer, if you fail to sign the form or to include all necessary information, or if you alter the form, your employer must withhold Illinois Income Tax on the entire amount of your compensation, without allowing any exemptions.

When must I submit this form?

You should complete this form and give it to your employer on or before the date you start work. You must submit Form IL-W-4 when Illinois Income Tax is required to be withheld from compensation that you receive as an employee. You may file a new Form IL-W-4 any time your withholding allowances increase. If the number of your claimed allowances decreases, you **must** file a new Form IL-W-4 within 10 days. However, the death of a spouse or a dependent does not affect your withholding allowances until the next tax year.

When does my Form IL-W-4 take effect?

If you do not already have a Form IL-W-4 on file with your employer, this form will be

effective for the first payment of compensation made to you after this form is filed. If you already have a Form IL-W-4 on file with this employer, your employer may allow any change you file on this form to become effective immediately, but is not required by law to change your withholding until the first payment of compensation is made to you after the first day of the next calendar quarter (that is, January 1, April 1, July 1, or October 1) that falls at least 30 days after the date you file the change with your employer.

Example: If you have a baby and file a new Form IL-W-4 with your employer to claim an additional allowance for the baby, your employer may immediately change the withholding for all future payments of compensation. However, if you file the new form on September 1, your employer does not have to change your withholding until the first payment of compensation is made to you after October 1. If you file the new form on September 2, your employer does not have to change your withholding until the first payment of compensation made to you after December 31.

How long is Form IL-W-4 valid?

Your Form IL-W-4 remains valid until a new form you have submitted takes effect or until your employer is required by the Department to disregard it. Your employer is required to disregard your Form IL-W-4 if

- you claim total exemption from Illinois Income Tax withholding, but you have not filed a federal Form W-4 claiming total exemption, or
- the Internal Revenue Service (IRS) has instructed your employer to disregard your federal Form W-4.

What is an "exemption"?

An "exemption" is a dollar amount on which you do not have to pay Illinois Income Tax that you may claim on your Illinois Income tax return.

What is an "allowance"?

The dollar amount that is exempt from Illinois Income Tax is based on the number of allowances you claim on this form. As an employee, you receive one allowance unless you are claimed as a dependent on another person's tax return (e.g., your parents claim you as a dependent on their tax return). If you are married, you may claim additional allowances for your spouse and any dependents that you are entitled to claim for federal income tax purposes. You also will receive additional allowances if you or your spouse are age 65 or older, or if you or your spouse are legally blind.

How do I figure the correct number of allowances?

Complete the worksheet on the back of this page to figure the correct number of allowances you are entitled to claim. Give your completed Form IL-W-4 to your employer. Keep the worksheet for your records.

Note If you have more than one job or your spouse works, your withholding usually will be more accurate if you claim all of your allowances on the Form IL-W-4 for the highest-paying job and claim zero on all of your other IL-W-4 forms.

How do I avoid underpaying my tax and owing a penalty?

You can avoid underpayment by reducing the number of allowances or requesting that your employer withhold an additional amount from your pay. Even if your withholding covers the tax you owe on your wages, if you have non-wage income that is taxable, such as interest on a bank account or dividends on an investment, you may have additional tax liability. If you owe more than \$500 tax at the end of the year, you may owe a late-payment penalty or will be required to make estimated tax payments. For additional information on penalties see Publication 103, Uniform Penalties and Interest. Visit our website at tax.illinois.gov to obtain a copy.

Where do I get help?

- Visit our website at tax.illinois.gov
- Call our Taxpayer Assistance Division at **1 800 732-8866** or **217 782-3336**
- Call our TDD (telecommunications device for the deaf) at **1 800 544-5304**
- Write to
**ILLINOIS DEPARTMENT OF REVENUE
PO BOX 19044
SPRINGFIELD IL 62794-9044**

Illinois Withholding Allowance Worksheet

General Information

Complete this worksheet to figure your total withholding allowances.

Complete Step 1.

Complete Step 2 if

- you (or your spouse) are age 65 or older or legally blind, or
- you wrote an amount on Line 4 of the Deductions and Adjustments Worksheet for federal Form W-4.

If you have more than one job or your spouse works, your withholding usually will be more accurate if you claim all of your allowances on the Form IL-W-4 for the highest-paying job and claim zero on all of your other IL-W-4 forms.

You may reduce the number of allowances or request that your employer withhold an additional amount from your pay, which may help avoid having too little tax withheld.

Step 1: Figure your basic personal allowances (including allowances for dependents)

Check all that apply:

- No one else can claim me as a dependent.
- I can claim my spouse as a dependent.

- 1 Enter the total number of boxes you checked. 1 _____
- 2 Enter the number of dependents (other than you or your spouse) you will claim on your tax return. 2 _____
- 3 Add Lines 1 and 2. Enter the result. This is the total number of basic personal allowances to which you are **entitled**. You are not required to claim these allowances. The number of basic personal allowances that you choose to claim will determine how much money is withheld from your pay. See Line 4 for more information. 3 _____
- 4 Enter the total number of basic personal allowances you choose to claim on this line and Line 1 of Form IL-W-4 below. This number may not exceed the amount on Line 3 above, however you can claim as few as zero. Entering lower numbers here will result in more money being withheld(deducted) from your pay. 4 _____

Step 2: Figure your additional allowances

Check all that apply:

- I am 65 or older.
- I am legally blind.
- My spouse is 65 or older.
- My spouse is legally blind.

- 5 Enter the total number of boxes you checked. 5 _____
- 6 Enter any amount that you reported on Line 4 of the Deductions and Adjustments Worksheet for federal Form W-4 plus any additional Illinois subtractions or deductions. 6 _____
- 7 Divide Line 6 by 1,000. Round to the nearest whole number. Enter the result on Line 7. 7 _____
- 8 Add Lines 5 and 7. Enter the result. This is the total number of additional allowances to which you are **entitled**. You are not required to claim these allowances. The number of additional allowances that you choose to claim will determine how much money is withheld from your pay. 8 _____
- 9 Enter the total number of additional allowances you elect to claim on Line 2 of Form IL-W-4, below. This number may not exceed the amount on Line 8 above, however you can claim as few as zero. Entering lower numbers here will result in more money being withheld(deducted) from your pay. 9 _____

IMPORTANT: If you want to have additional amounts withheld from your pay, you may enter a dollar amount on Line 3 of Form IL-W-4 below. This amount will be deducted from your pay in addition to the amounts that are withheld as a result of the allowances you have claimed.

----- Cut here and give the certificate to your employer. Keep the top portion for your records. -----

Illinois Department of Revenue IL-W-4 Employee's Illinois Withholding Allowance Certificate

_____-_____-_____-
Social Security number

Name

Street address

_____-_____-_____-
City State ZIP

Check the box if you are exempt from federal and Illinois
Income Tax withholding and sign and date the certificate.

- 1 Enter the total number of basic allowances that you are claiming (Step 1, Line 4, of the worksheet). 1 _____
- 2 Enter the total number of additional allowances that you are claiming (Step 2, Line 9, of the worksheet). 2 _____
- 3 Enter the additional amount you want withheld (deducted) from each pay. 3 _____

I certify that I am entitled to the number of withholding allowances claimed on this certificate.

Your signature

Date

This form is authorized under the Illinois Income Tax Act. Disclosure of this information is required. Failure to provide information may result in this form not being processed and may result in a penalty.

Employer: Keep this certificate with your records. If you have referred the employee's federal certificate to the IRS and the IRS has notified you to disregard it, you may also be required to disregard this certificate. Even if you are not required to refer the employee's federal certificate to the IRS, you still may be required to refer this certificate to the Illinois Department of Revenue for inspection. See Illinois Income Tax Regulations 86 Ill. Adm. Code 100.7110.

ELECTRONIC I-9 INSTRUCTIONS

The Electronic I-9 must be completed prior to any work or training at Norris, or before being hired into any position at Northwestern.

Document Requirement: As part of the I-9 process, you *must* present original copies of documents proving work eligibility (see step 3). Only certain documents are accepted, and copies/faxes/emails are not valid. Please ensure you have appropriate documents prior to completing the I-9 form. You will not be allowed to work until original documents are reviewed in person.

1. Create an I-9 Account

Go to: <https://northwestern.i9servicecenter.com>

The screenshot shows the 'NEW EMPLOYEES' registration page. The page is divided into two main sections: 'Existing Accounts' on the left and 'NEW EMPLOYEES' on the right. The 'NEW EMPLOYEES' section contains the following fields and instructions:

- Username:** 4 characters minimum. Letters and numbers only.
- Password:** Password must be between 8 and 14 characters. They must contain one upper case, one lowercase, one numeric and one special character. Acceptable Special Characters are @ _ ! # \$ % () * + - ~
- Confirm:** (Same requirements as Password)
- Email Address:** Please enter your preferred email address for I-9 correspondence. It does not have to be a Northwestern email. If you do not have an email account, you can skip this step.
- Start Date:** Please retain your Username and Password in case you need to access the I-9 Service Center in the future. Please enter the first day you start(ed) employment with Northwestern University.
- School/Area:** [Select School/Area]
- Department/Center:** [Select Department/Center]

Numbered callouts on the right side of the page correspond to the following steps:

1. Create a username. You may use your University NetID or a different name.
2. Create and confirm a password; note the restrictions. You may use your NetID password (if it conforms to the password restrictions) or a new password.
3. Enter your primary email address.
4. Enter today's date as the "Start Date," regardless of if you are beginning work today.
5. Choose "Student Affairs" as the School/Area.
6. Select your Norris Department (see list below) for Department/Center.

Norris Department/Center List:

Choose the number in the drop-down that corresponds to your department below, even if the name is different online:

ARTica – 1863	Center Desk – 1869	Event Planning – 1862	Norris Outdoors – 2021
Bookstore/Apple Store – 1866	Center Manager – 1869	Facilities/Maint – 1860	Perf/Satellites – 1867
Box Office – 1847	Cashier's Office – 2006	Game Room – 1865	Production/Tech – 2020
Business Operations – 1861	Dittmar Gallery – 1864	Mini Courses – 1861	SOFO – 2005

2. Complete Section 1 of Form I-9

Department of Homeland Security
U.S. Citizenship and Immigration Services

OMB No. 1615-0047 Expires 08/31/12
Form I-9, Employment Eligibility Verification

Please read [instructions](#) carefully before completing this form. The instructions must be available during completion of this form. ANTI-DISCRIMINATION NOTICE: It is illegal to discriminate against work-authorized individuals. Employers CANNOT specify which document(s) they will accept from an employee. The refusal to hire an individual because the documents have a future expiration date may also constitute illegal discrimination.

Section 1. Employee Information and Verification. To be completed and signed by employee at the time employment begins.

Print Name: Last	First	Middle Initial	Maiden Name
Address (Street Name and Number)		Apt. #	Date of Birth (month/day/year)
City	State	Zip Code	Social Security #

I am aware that federal law provides for imprisonment and/or fines for false statements or use of false documents in connection with the completion of this form.

I attest, under penalty of perjury, that I am (check one of the following):

- A citizen of the United States
- A noncitizen national of the United States (see instructions)
- A lawful permanent resident (Alien #)
- An alien authorized to work (Alien # or Admission #)

until (expiration date, if applicable - month/day/year) / /

Indefinite

Employee's Signature _____ Date (month/day/year) 3/30/2010

Preparer and/or Translator Certification. (To be completed and signed if Section 1 is prepared by a person other than the employee.) I attest, under penalty of perjury, that I have assisted in the completion of this form and that to the best of my knowledge the information is true and correct.

Preparer's/Translator's Signature _____	Print Name _____
Address (Street Name and Number, City, State, Zip Code) _____	Date (month/day/year) _____

1. Enter your Last Name, First Name, and Middle Initial *exactly as they appear on your Social Security Card or official document.*

2. Enter your permanent address, birth date, and social security number (required).

3. Complete the citizenship question.

4. Do NOT fill out the "Preparer and Translator Certification."

5. Scroll down to submit the form. Then scroll down again to electronically sign. **Make sure you sign with the exact name you used in Section 1, this time typing your first name first (do not put a period after your middle initial).** Submit your electronic signature.

3. Bring Documents to Student Employment Coordinator

Although the online form is completed, your I-9 is not finished until you bring original documents proving your work eligibility to the Norris Student Employment Coordinator. *Under federal law, copies, faxes, and emails will not be accepted;* you must have originals sent to you if you do not have them. Your documents will be returned to you immediately.

See the attached list for eligible documents – you must either have one document from "List A," or one from both "List B" and "List C." Please contact the Student Employment Coordinator if you have any questions.

Your hire is not complete, and you are not allowed to work or participate in training, until appropriate original documents are presented. Any hours logged until that point will be considered volunteer work.

LISTS OF ACCEPTABLE DOCUMENTS

All documents must be unexpired

LIST A

**Documents that establish Both
Identity and Employment
Authorization**

LIST B

**Documents that Establish
Identity**

LIST C

**Documents that Establish
Employment Authorization**

OR

AND

<p>1. U.S. Passport or U.S. Passport Card</p> <hr/> <p>2. Permanent Resident Card or Alien Registration Receipt Card (Form I-551)</p> <hr/> <p>3. Foreign Passport that contains a temporary I-551 stamp or temporary I-551 printed notation on a machine-readable immigrant visa</p> <hr/> <p>4. Employment Authorization Document that contains a photograph (Form I-766)</p> <hr/> <p>5. In the case of a nonimmigrant alien authorized to work for a specific employer incident to status, a foreign passport with Form I-94 or Form I-94A bearing the same name as the passport and containing an endorsement of the alien's nonimmigration status, as long as the period of endorsement has not yet expired and the proposed employment is not in conflict with any restrictions or limitations identified on the form</p> <hr/> <p>6. Passport from the Federated States of Micronesia (FSM) or the Republic of the Marshall Islands (RMI) with Form I-94 or Form I-94A indicating nonimmigrant admission under the Compact of Free Association Between the United States and the FSM or RMI</p>	<p>1. Driver's license or ID Card issued by a State or outlying possession of the United States provided it contains a photograph or information such as name, date of birth, gender, height, eye color, and address</p> <hr/> <p>2. ID card issued by federal, state or local government agencies or entities, provided it contains a photograph or information such as name, date of birth, gender, height, eye color, and address</p> <hr/> <p>3. School ID card with a photograph</p> <hr/> <p>4. Voter's registration card</p> <hr/> <p>5. U.S. Military card or draft record</p> <hr/> <p>6. Military dependent's ID Card</p> <hr/> <p>7. U.S. Coast Guard Merchant Mariner Card</p> <hr/> <p>8. Native American tribal document</p> <hr/> <p>9. Driver's license issued by a Canadian government authority</p> <hr/> <p style="text-align: center;">For persons under age 18 who are unable to present a document listed above:</p> <hr/> <p>10. School record or report card</p> <hr/> <p>11. Clinic, doctor, or hospital record</p> <hr/> <p>12. Day-care or nursery school record</p>	<p>1. Social Security Account Number card other than one that specifies on the face that the issuance of the card does not authorize employment in the United States</p> <hr/> <p>2. Certification of Birth Abroad issued by the Department of State (Form FS-545)</p> <hr/> <p>3. Certification of Report of Birth issued by the Department of State (Form DS-1350)</p> <hr/> <p>4. Original or certified copy of birth certificate issued by a State, county, municipal authority, or territory of the United States bearing an official seal</p> <hr/> <p>5. Native American tribal document</p> <hr/> <p>6. U.S. Citizen ID Card (Form I-197)</p> <hr/> <p>7. Identification Card for Use of Resident Citizen in the United States (Form I-179)</p> <hr/> <p>8. Employment authorization document issued by the Department of Homeland Security</p>
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Illustrations of many of these documents appear in Part 8 of the Handbook for Employers (M-274)



ACKNOWLEDGEMENT OF MANDATED REPORTER STATUS

I, _____, understand that when I am employed as a
(Employee Name)

_____, I will become a mandated reporter under the
(Type of Employment)

Abused and Neglected Child Reporting Act [325 ILCS 5/4]. This means that I am required to report or cause a report to be made to the child abuse Hotline number at 1-800-25-ABUSE (1-800-252-2873) whenever I have reasonable cause to believe that a child known to me in my professional or official capacity may be abused or neglected. I understand that there is no charge when calling the Hotline number and that the Hotline operates 24-hours per day, 7 days per week, 365 days per year.

I further understand that the privileged quality of communication between me and my patient or client is not grounds for failure to report suspected child abuse or neglect, I know that if I willfully fail to report suspected child abuse or neglect, I may be found guilty of a Class A misdemeanor. This does not apply to physicians who will be referred to the Illinois State Medical Disciplinary Board for action.

I also understand that if I am subject to licensing under but not limited to the following acts: the Illinois Nursing Act of 1987, the Medical Practice Act of 1987, the Illinois Dental Practice Act, the School Code, the Acupuncture Practice Act, the Illinois Optometric Practice Act of 1987, the Illinois Physical Therapy Act, the Physician Assistants Practice Act of 1987, the Podiatric Medical Practice Act of 1987, the Clinical Psychologist Licensing Act, the Clinical Social Work and Social Work Practice Act, the Illinois Athletic Trainers Practice Act, the Dietetic and Nutrition Services Practice Act, the Marriage and Family Therapy Act, the Naprapathic Practice Act, the Respiratory Care Practice Act, the Professional Counselor and Clinical Professional Counselor Licensing Act, the Illinois Speech-Language Pathology and Audiology Practice Act, I may be subject to license suspension or revocation if I willfully fail to report suspected child abuse or neglect.

I affirm that I have read this statement and have knowledge and understanding of the reporting requirements, which apply to me under the Abused and Neglected Child Reporting Act.

Signature of Applicant/Employee

Date

CANTS 22
Rev. 8/2013

Northwestern

FEDERAL WORK-STUDY

2019-2020

Federal Work-Study Program

AUTHORIZATION FORM

Student Section

Last Name: _____
First Name: _____
Social Security Number (last 4 digits only): _____
NU ID Number: _____
E-mail: _____
Federal Work-Study Awarded
for Academic Year 2019-2020: _____

Supervisor Section

Name of Dept./Organization: _____
Chartstring: _____
HR Dept. ID (ends in "98"): _____
Account Code: 60122 _____
Supervisor Name: _____
Supervisor Email: _____
Wage Rate/hour: _____

Northwestern University Work-Study Office
1801 Hinman Avenue, 3rd Floor
Evanston, IL 60208-1270

Work-Study Coordinator: Anne Horne (a-horne@northwestern.edu)

This form must be returned to the Work-Study Office immediately. The student and supervisor should both retain copies of this form for their records.

Student Certification

I agree to accept employment in the department named above for the wage stated. I understand that I will be expected to perform my duties in a responsible manner and to comply with the requirements of the job and the instructions from my supervisor. I further understand that my employment is contingent upon satisfactory job performance and that I may be removed from my position and from the Federal Work-Study Program if I do not meet minimum standards. I will accurately record my work hours and will maintain a record of my earnings in order not to exceed my limit.

Student Signature

Date

Supervisor Certification

I agree to hire the above named student for the wage stated and under the conditions described above. I will supervise the work performed and I will be responsible for approving the Work-Study employee time record for the Payroll Office. I will also be responsible for maintaining a record of student earnings and may not pay students beyond their earnings limit, which may be changed from the amount above by the Financial Aid Office. I understand that participation in the program is contingent upon satisfactory compliance with the policies and procedures outlined on the Work-Study web site. I further understand that any violation of those procedures may jeopardize this department's participation in the program.

Supervisor Signature

Date

Northwestern University and its employers agree that no student will be denied work or subjected to different treatment on the grounds of race, age, sex, color, religion, national origin, sexual orientation, marital status, age, disability or veteran status, and that it will comply with the provisions of the Civil Rights Act of 1964.

Fax: 847/467-5912

<http://undergradaid.northwestern.edu/work-study>

Phone: 847/491-7574

Submit Your Direct Deposit Request Online

If you are paid by Northwestern and have an active NetID, you may submit or change your Direct Deposit online in myHR at any time. If you are a new employee, you will receive information about your NetID from your hiring department or manager.

1. If you are a new hire, first activate your Northwestern NetID.
Instructions for activating your NetID will be provided by your hiring department or manager.

2. Log into myHR at www.northwestern.edu/myhr using your Northwestern NetID and Password.

3. Click the "Pay" option and select "My Direct Deposit" on the left side.

4. To add an account, click the purple [+] button and follow the on-screen options.
To edit an existing account, click that account and make any necessary changes.

Submit Your Direct Deposit Request in Person

For the security of your personal information, we strongly recommend that you complete your Direct Deposit online using the instructions above.

If you cannot submit your Direct Deposit online, and if you do not complete this form as part of your hiring paperwork, you must present this paper form **in person** and with **photo identification**. *Mailed, emailed, or faxed forms will not be acknowledged or processed.*

Bring this form, original photo identification, and a voided check (or bank-generated, printed direct deposit setup form) that shows your Routing and Account numbers to HR Operations on either campus. Office hours are Monday-Friday, 8am-5pm (excluding university holidays).

720 University Place, 2nd Floor, Evanston Campus or 710 N Lake Shore Drive, Room 850, Chicago Campus

REQUEST INFORMATION

Legal Name	Last:	First:	Middle:	Northwestern ID Number or SSN:
Direct Deposit Request: <input type="checkbox"/> Start Direct Deposit <input type="checkbox"/> Add an Account <input type="checkbox"/> Change an Account <input type="checkbox"/> Stop Direct Deposit				

PRIMARY DEPOSIT ACCOUNT - REQUIRED *account that you want to receive your pay, minus any money designated as an additional account below*

Name of Bank or Financial Institution	Bank ABA Routing Transit Number	Account Number	Checking or Savings	Amount or Percentage
				Balance

ADDITIONAL DEPOSIT ACCOUNT(S) - OPTIONAL *additional accounts that you would like to use, in order of priority (attach another sheet if necessary)*

Name of Bank or Financial Institution	Bank ABA Routing Transit Number	Account Number	Checking or Savings	Amount or Percentage

INTERNATIONAL PROCESSING

Do you intend to forward any entire payment made through direct deposit to one of the accounts listed above to a bank account outside the U.S.? <input type="checkbox"/> Yes <input type="checkbox"/> No	If Yes, which account(s) listed above?
--	--

AUTHORIZATION

I authorize Northwestern University to remit my net pay to the account(s) at the institution(s) indicated above and further authorize Northwestern University to initiate a withdrawal from the account(s) to adjust for deposit entries made in error. I should not assume that the direct deposit is completed until I receive my first Notice of Advice on payday or view my pay statement online in myHR. This authorization is to remain in full force and effect until revoked by me in writing.	
Signature:	Date:

Note: Any time your direct deposit information is updated – either by you, or by HR Operations on behalf of you – you will receive a message to your Northwestern email address confirming that changes have been made. This email will be sent one time for every account that is added or removed and is intended as a security precaution.