

# Boston College

Name \_\_\_\_\_ Eagle ID \_\_\_\_\_

Local Address \_\_\_\_\_

Permanent Home Address \_\_\_\_\_

Home Phone \_\_\_\_\_ Work Phone \_\_\_\_\_

Agency Name \_\_\_\_\_

Job Title \_\_\_\_\_ Job Class 920 \_\_\_\_\_

Boston College Assigned Account Number \_\_\_\_\_

Begin Date \_\_\_\_\_ End Date \_\_\_\_\_

Rate of Pay \_\_\_\_\_

Average Number of Hours Per Week \_\_\_\_\_ Number of Weeks \_\_\_\_\_

Agency Authorization Signature \_\_\_\_\_ Date \_\_\_\_\_

Academic Year     Summer    Work-Study Amount \_\_\_\_\_

I-9 Completed                       Yes             No

A new BC Student Employee       Yes             No

Payroll Form Statement Completed     Yes             No

Approved by \_\_\_\_\_ Date \_\_\_\_\_

Job Request No. \_\_\_\_\_

# **Instructions for Completing this Hire/Rehire Form**

## **Student:**

Complete the student data section. If you are a new employee to Boston College, please be certain that your