

STUDENT EMPLOYMENT INFORMATION FORM

Date	CWID Number:
Student Name:	Cell Phone:
Address:	Home Phone:
State/Province: Zip Code:	
Employee Status	
Start Date:	Job title:
Department	Supervisor Name
Salary	
Type of Employment	
○ Undergraduate Work Study ○ Graduate Work Study ○ Non- Work Study Student	
Are you a US Citizen ?	
Yes No, Please answer below.	
Alien Registration Number	
Type of US Visa	Visa Number
Date of Entry to US	
Have you previously worked for Stevens Institute of Technology?	
Yes, if so have you previously filled out an I-9 form?	No, and I have attached my I-9 Form with my proper
○ Yes ○ No	documentation.
Educational Information	
Student Year:	Full-Time Student Part-Time Student
Credits Earned	Previous Degree?
Person to Notify in Case of Emergency	
Name:	Relationship:
Home Phone:	Cell Phone:
Work Phone:	
Student Signature	Date
Additional Comments (For Office Use Only):	