

# Student Payroll Authorization Form Summer Semester

Bemidji State University



Northwest Technical College

Members of the Minnesota State system

**IMPORTANT:** Students are not to start work until cleared for payroll and issued a time sheet.

**New international students must set up an appointment with Business Services to complete documentation prior to beginning work.**

- Supervisor verifies the student is eligible to work by meeting the requirement of being pre-registered for a minimum of 6 credits for the following fall semester. An exception is made for students who are enrolled during the summer and will be completing a degree during the summer.
- New payroll students must complete the new-hire documentation in person with Business Services.
- Completed payroll authorization forms must be **EMAILED** to [student.payroll@bemidjistate.edu](mailto:student.payroll@bemidjistate.edu)

**! TWO separate payroll authorization forms must be completed for students employed the entire summer semester.**

*One form for the start of summer semester through the remainder of the current fiscal year (through June 30<sup>th</sup>), and one form for the new fiscal year (starting July 1 through the end of summer semester).*

## SECTION A: Payroll Authorization Period

FY \_\_\_\_ (ending June 30th)                      or                       FY \_\_\_\_ (starting July 1)

## SECTION B: Student Information

Student Tech ID (8-digit all numeric): \_\_\_\_\_

Legal Name: \_\_\_\_\_ Preferred Name: \_\_\_\_\_

Current Local Address: \_\_\_\_\_ Phone: \_\_\_\_\_

## SECTION C: Employer Information

Department: \_\_\_\_\_ Program Code (6-digit all numeric): \_\_\_\_\_

Routing ID: BSU S0 \_\_\_\_\_ or NTC S9 \_\_\_\_\_

Start Date: \_\_\_\_\_ End Date: \_\_\_\_\_

Type of Payment:  Hourly (e-Time) or  Stipend (special projects only)

Total Amount Authorized: \$ \_\_\_\_\_

Supervisor Name (print): \_\_\_\_\_

Supervisor Signature: \_\_\_\_\_

Supervisor Tech ID (8-digit all numeric): \_\_\_\_\_

Student Payroll, D203B

Email: [student.payroll@bemidjistate.edu](mailto:student.payroll@bemidjistate.edu)

Office Use Only: Pay Rate: \_\_\_\_\_ Authorization #: \_\_\_\_\_ Date: \_\_\_\_\_