Important I-9 Information
Complete the Form I-9 within three (3) business days of your date of hire (see p. 7). Submit your I-9 (citizenship) documents in person to an authorized Office of Human Resources location (see p. 8).

Please read the List of Acceptable Documents on p.9 of this packet. You must show:
• One original document from List A —or—
• Two original documents: one from List B (Identity) and one from List C (work eligibility). *

Note: You CANNOT use two documents from the same list to meet the DHS regulations of employment.

Copies of documents are not acceptable

* International employees on an F-1, J-1 or H1B visa status must also present form I-20, DS-2019 or I-797 to determine sponsorship and length of employment eligibility.

Tax Questions
Federal
Internal Revenue Service (IRS)
Taxpayer Assistance 800-829-1040

State
Arizona Dept. of Revenue (ADOR)
Taxpayer Assistance 602-255-3381

The ASU Payroll Office cannot offer tax advice.

New Hire Packet
Your new employee to-do list
Before Your First Day
p.2 Complete all requested data on the Personal Data Form
p.4 For U.S. Citizens and Permanent Residents only:
Read, sign and date the Public Employee or Officer Loyalty Oath
p.5 For Graduate Assistants/Associates and Student Workers only:
Read and understand the Tax Withholding on Student Wages information. Keep for your records.

p.6 Read, sign and date the Conditions of Employment form.

p.7 Complete Form I-9 as instructed.

p.10 Review New Health Insurance Marketplace Coverage Options

After Your First Day
Go to My ASU > Faculty or Staff link > My Employment > Payroll, then:
Complete your Arizona State (A-4) and Federal W-4 forms online:
Payroll > Tax Information > A-4 Tax Information or W-4 Tax Information

For direct deposit of your paycheck
Complete the direct deposit information online:
Payroll > Direct Deposit

To get a paper paycheck
Do nothing and your department will be sent your check each pay period.

Go to My ASU > Faculty or Staff link > Employment > Personal, then:
Use Veterans Status link to complete Protected Veteran Post-Offer Invitation to Self-Identify
Use the Disability Status link to complete Voluntary Self-identification of Disability

Return This New Hire Packet in Person

Downtown Phoenix campus
Return to your department contact
—or—
OHR Office Post Office Building
522 N. Central, Room 245, Phoenix 85004
Office Hours: Monday, 9 a.m. – 4 p.m.
Phone: 855-278-5081

Polytechnic campus
Return to your department contact.

Tempe campus
Office of Human Resources Employee Service Center
University Center (UCNTRA)
1100 E. University Drive, Tempe 85287
Office Hours: Monday–Friday, 8 a.m. – 5 p.m.
Phone: 855-278-5081

West campus
Office of Human Resources
Faculty/Administration Building (FAB), Third Floor South
13591 N. 47th Ave., Phoenix 85306
Office Hours: Monday, Wednesday, Thursday, 8 a.m. – 5 p.m.
Phone: 855-278-5081

Revised 2-3-16
### Personal Data Form

**ASU ID Number**

☐ New Employee  ☐ Current Employee  ☐ Rehire

**Student Worker**  ☐ Yes  ☐ No

**Please enter your NAME as it appears on your Social Security card**

<table>
<thead>
<tr>
<th>Last Name</th>
<th>First Name</th>
<th>Middle Name</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**Home Address**

<table>
<thead>
<tr>
<th>Apt/Suite/Unit #</th>
<th>City</th>
<th>State</th>
<th>Zip Code</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**Mailing Address** (if different from Home Address)

<table>
<thead>
<tr>
<th>Apt/Suite/Unit #</th>
<th>City</th>
<th>State</th>
<th>Zip Code</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**Phone Numbers (include area code)**

<table>
<thead>
<tr>
<th>Home:</th>
<th>Cell:</th>
<th>ASU:</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**Email Addresses**

<table>
<thead>
<tr>
<th>Personal:</th>
<th>ASU:</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**Social Security Number:**

<table>
<thead>
<tr>
<th>Date of Birth:</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
</tr>
</tbody>
</table>

**Marital Status:**

☐ Single (S)  ☐ Married (M)  ☐ Legally Separated (L)  ☐ Divorced (D)  ☐ Widowed (W)

**Emergency Contact**

<table>
<thead>
<tr>
<th>Name:</th>
<th>Relationship:</th>
<th>Phone Number:</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**Highest Education Level**

☐ Less than H.S. Graduate (B)  ☐ H.S. Graduate/Equivalent (C)

☐ Some College (D)  ☐ Technical School (E)

☐ 2-Year College Degree (F)  ☐ Bachelor’s Level Degree (G)

☐ Some Graduate School (H)  ☐ Master’s Level Degree (I)

☐ Doctorate–Academic (J)  ☐ Doctorate–Professional (K)

**Gender:**

☐ Female  ☐ Male

**Disabled:**

☐ Yes  ☐ No

**Are you Hispanic or Latino?** (Definitions on next page)

☐ Yes, I am Hispanic or Latino  ☐ No, I am not Hispanic or Latino

**What is your race?** Select one or more (Definitions on next page)

☐ American Indian or Alaskan Native  ☐ Asian

☐ Black or African American  ☐ Native Hawaiian or Other Pacific Islander

☐ White

**Veteran Status – Please check all that apply** (Definitions on next page)

☐ Not Applicable  ☐ Veteran of the Vietnam Era

☐ Other Protected Veteran  ☐ Armed Forces Service Medal Veteran

☐ Special Disabled Veteran  ☐ Disabled Veteran

If you have been discharged within the last 3 years, please provide the date of discharge or release from active duty:  ____________________

The information stated above is correct and accurate to the best of my ability. I understand I must make all future changes through My ASU as soon as possible.

Employee Signature:  ____________________  Date:  ____________________
Ethnicity
Hispanic or Latino: A person of Cuban, Mexican, Puerto Rican, South or Central American, or other Spanish
culture or origin, regardless of race.

Race
American Indian or Alaska Native: A person having origins in any of the original peoples of North and South America (in-
cluding Central America), and who maintains tribal affiliation or community attachment.

Asian: A person having origins in any of the original peoples of the Far East, Southeast Asia, or the Indian subcontinent, in-
cluding, for example, Cambodia, China, India, Japan, Korea, Malaysia, Pakistan, the Philippine Islands, Thailand and Vietnam.

Black or African American: A person having origins in any of the black racial groups of Africa.

Native Hawaiian or other Pacific Islander: A person having origins in any of the original peoples of Hawaii, Guam, Samoa,
or other Pacific Islands.

White: A person having origins in any of the original peoples of Europe, the Middle East or North Africa.

Veteran Status Definitions
Arizona State University is a government contractor subject to the Vietnam Era Veterans’ Readjustment Assistance Act of 1974
(38 U.S.C.4212), as amended, which requires government contractors to take affirmative action to employ and advance in em-
ployment certain qualified protected veterans, including: (1) disabled veterans; (2) recently separated veterans; (3) active duty
wartime or campaign badge
veterans; and (4) Armed Forces service medal veterans. These classifications are defined as follows:

Disabled veteran: (i) a veteran of the U.S. military, ground, naval or air service who is entitled to compensation (or who but
for the receipt of military retired pay would be entitled to compensation) under laws administered by the Secretary of Veterans
Affairs; or (ii) a person who was discharged or released from active duty because of a service connected disability

Recently separated veteran: any veteran during the three-year period beginning on the date of such veteran’s discharge or
release from active duty in the U.S. military, ground, naval or air service.

Active duty wartime or campaign badge veteran: a veteran who served in the U.S. military, ground, naval or air service
during a war, or in a campaign or expedition for which a campaign badge has been authorized under the laws administeredby
the Department of Defense.

An Armed Forces service medal veteran: a veteran who, while serving on active duty in the U.S. military, ground, naval or
air service, participated in a United States military operation for which an Armed Forces service medal was awarded pursuant
to Executive Order 12985.

Disability Definitions
You are considered to have a disability if you have a physical or mental impairment or medical condition that substantially
limits a major life activity, or if you have a history or record of such an impairment or medical condition. Disabilities include,
but are not limited to:

<table>
<thead>
<tr>
<th>Disability</th>
<th>Disability</th>
<th>Disability</th>
</tr>
</thead>
<tbody>
<tr>
<td>Blindess</td>
<td>Cerebral Palsy</td>
<td>Missing or partially missing limbs</td>
</tr>
<tr>
<td>Deafness</td>
<td>HIV/AIDS</td>
<td>Post-traumatic Stress Disorder (PTSD)</td>
</tr>
<tr>
<td>Cancer</td>
<td>Muscular Dystrophy</td>
<td>Obsessive-compulsive Disorder (OCD)</td>
</tr>
<tr>
<td>Diabetes</td>
<td>Schizophrenia</td>
<td>Impairments requiring a wheelchair</td>
</tr>
<tr>
<td>Epilepsy</td>
<td>Bipolar Disorder</td>
<td>Intellectual Disability</td>
</tr>
<tr>
<td>Autism</td>
<td>Major Depression</td>
<td>previously call mental retardation</td>
</tr>
<tr>
<td></td>
<td>Multiple Sclerosis (MS)</td>
<td></td>
</tr>
</tbody>
</table>
Arizona State University is required by state law to reproduce the following statute and obtain each employee’s signature in paragraph E. Sec. 38-231, Arizona Revised Statutes.

38-231. Officers and employees required to take loyalty oath; form; classification; definition

A. In order to ensure the statewide application of this section on a uniform basis, each board, commission, agency and independent office of this state, and of any of its political subdivisions, and of any county, city, town, municipal corporation, school district and public educational institution, shall completely reproduce this section so that the form of written oath or affirmation required in this section contains all of the provisions of this section for use by all officers and employees of all boards, commissions, agencies and independent offices.

B. Any officer or employee who fails to take and subscribe to the oath or affirmation provided by this section within the time limits prescribed by this section is not entitled to any compensation until the officer or employee does take and subscribe to the form of oath or affirmation prescribed by this section.

C. Any officer or employee having taken the form of oath or affirmation prescribed by this section, and knowingly at the time of subscribing to the oath or affirmation, or at any time thereafter during the officer’s or employee’s term of office or employment, does commit or aid in the commission of any act to overthrow by force, violence or terrorism as defined in section 13-2301 the government of this state or of any of its political subdivisions, or advocates the overthrow by force, violence or terrorism as defined in section 13-2301 of the government of this state or any of its political subdivisions, is guilty of a class 4 felony and, on conviction under this section, the officer or employee is deemed discharged from the office or employment and is not entitled to any additional compensation or any other emoluments or benefits which may have been incident or appurtenant to the office or employment.

D. Any of the persons referred to in article XVIII, section 10, Constitution of Arizona, as amended, relating to the employment of aliens, are exempted from any compliance with this section.

E. In addition to any other form of oath or affirmation specifically provided by law for an officer or employee, before any officer or employee enters upon the duties of the office or employment, the officer of employee shall take and subscribe the following oath or affirmation:

State of Arizona, County of Maricopa I, ______________________________________

______________ (type or print name)

do solemnly swear (or affirm) that I will support the Constitution of the United States and the Constitution and laws of the State of Arizona, that I will bear true faith and allegiance to the same and defend them against enemies, foreign and domestic, and that I will faithfully and impartially discharge the duties of the office of ______________________ according to the best of my ability, so help me God (or so I do affirm). ___________________ (name of office)

Date ____________________ __________________________________

__________________________ (signature of officer or employee)

F. For the purposes of this section, “officer or employee” means any person elected, appointed or employed, either on a part-time or full-time basis, by this state or any of its political subdivisions or any county, city, town, municipal corporation, school district, public educational institution or any board, commission or agency of any county, city, town, municipal corporation, school district or public educational institution.
**Tax Withholding on Student Wages**

Wages paid to a student employee through the payroll system are subject to the following withholding taxes: Federal Income Tax, State Income Tax and FICA (Social Security and Medicare).

The withholding of federal and state taxes is dependent upon the student's biweekly gross income and how the student files their W-4 and A-4 forms. A student may seek advice from the Internal Revenue Service regarding how to file their W-4 Form or advice from the Arizona Department of Revenue regarding how to file their A-4 Form.

IRS toll-free number | 1-800-829-1040.
Arizona Department of Revenue toll-free number | 1-800-843-7196

The number of credit hours a student is enrolled for at the end of the drop/add period determines whether or not FICA tax is withheld. To be exempt from FICA tax a student must be enrolled at least half time:

<table>
<thead>
<tr>
<th></th>
<th>Spring or Fall Term</th>
<th>Summer Term</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>(comprised of Session A and/or Session B and/or Session C)</td>
<td>(Comprised of Session A and/or Session B and/or Session C)</td>
</tr>
<tr>
<td>Undergraduate</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Graduate</td>
<td>6 or more hours</td>
<td>2 or more hours</td>
</tr>
<tr>
<td>Graduate Assistant*</td>
<td>5 or more hours</td>
<td>2 or more hours</td>
</tr>
<tr>
<td></td>
<td>3 or more hours</td>
<td>1 or more hours</td>
</tr>
</tbody>
</table>

If break between classes is more than 5 weeks, FICA exemption does not apply.

* For enrollment verification purposes, Graduate Assistant is a generic term used in the table above that includes Graduate Assistants, Graduate Research Assistants/Associates and Graduate Teaching Assistants/Associates.

**F1 and J1 Status Non-resident Alien Student Exemption**

Non-resident Alien (NRA) student admitted to the United States on an F1 or J1 (Scholar) visa remain in a FICA tax exempt status regardless of the credit-hour enrollment requirement until they have passed the substantial presence test (i.e., been present in the United States more than four calendar years.)

**More Info**

ASU Foreign Visitors Tax Guide: cfo.asu.edu/fs-taxguide
Conditions of Employment Form
(Required of New Hire)

Instructions
1. Required of all employees prior to employment.
2. Please read the following statements and sign.
3. The signed form will be placed in the your personnel file.

False Statements
In applying for positions at ASU, I understand that any false statement, misrepresentations or omission of requested information will disqualify me for employment consideration or cause my subsequent dismissal.

Drug-Free Workplace Requirements
It is prohibited to unlawfully manufacture, sell, possess, distribute, dispense, or use controlled substances in the workplace.
As a condition of employment, each staff member must agree to:
1. Abide by the term policy SPP 315 (Drug Free Workplace Requirements).
2. Notify the ASU General Counsel’s Office of any criminal drug conviction for a violation occurring in the workplace within five days after such conviction.

Commercial Driver’s License (CDL)
Any employee who drives or repairs commercial vehicles must have a Commercial Driver’s License (CDL) and is subject to alcohol and drug testing in accordance with the Employee Testing Act of 1991 and the U.S. Department of Transportation/Alcohol and Drug Testing Compliance regulations: 49CFR part 382.102.

Proof of Citizenship
I understand that I will be required to show proof of citizenship or the legal right to work in the United States within three (3) working days of the hire date.

Authorization
I authorize ASU to investigate all statements on my application materials, including contacting my professional references. I realize that I have the right to make a written request within 6 months to receive information about the nature and scope of this investigation.

Overtime
The overtime policy of ASU for non-exempt employees is to provide, at its discretion, either one and one-half hours compensatory time off or additional pay at one and one-half times the regular rate of pay for each hour worked in excess of 40 hours per week (exclusive of flexible work schedules/work weeks). The compensatory time off may be preserved, used or cashed out as provided by the Fair Labor Standards Act. I understand and agree to accept this overtime policy as a condition of employment as non-exempt staff with ASU. In the event I am exempt staff at the time of initial hire and subsequently reclassified to non-exempt staff, I understand and agree to accept this overtime policy as a condition of my continued employment. My decision to accept this overtime policy is made knowingly, voluntarily and without coercion by ASU.

I have read and understand the above statements. I verify that the information I have submitted on this form is accurate and complete.

Signature

ASU ID Number

Date Signed

Arizona State University is an equal opportunity/affirmative action employer.
I-9 Instructions

Per federal regulations, ASU must document that each new employee (both citizen and noncitizen) hired after Nov. 6, 1986, is authorized to work in the United States. See instructions below to complete your Form I-9.

Step 1: Log onto Equifax Employee site:
secure.i9.talx.com/preauthenticated/LoginCAPTCHA.ascx?Employer=13789

Step 2: Complete Section 1 of Form I-9:
- Start date: Enter your first day of work (listed on your Offer Letter).
- Location code: Select the location where you will present your original documentation.
- Citizenship status: You must select the correct status based on your situation.
  Need more details? See p. 2 of the I-9 Instructions:
- Print and/or email confirmation and gather your original documents

Step 3: Visit an ASU Office of Human Resources location to complete Section 2 of Form I-9.
You must bring the appropriate original documents:
- Your offer letter and I-9 Confirmation Email
- The required documentation (see the list on p. 9 of this packet)
  - one (1) document from List A OR
  - two (2) documents, one from List B and one from List C

Find an ASU OHR Office Location
See p. 8 of this New Hire Packet.

Questions?

<table>
<thead>
<tr>
<th>By Phone</th>
<th>By Email</th>
</tr>
</thead>
<tbody>
<tr>
<td>Employee Service Center</td>
<td><a href="mailto:HRESC@asu.edu">HRESC@asu.edu</a></td>
</tr>
<tr>
<td>855-ASU-5081</td>
<td></td>
</tr>
<tr>
<td>(855-278-5081)</td>
<td></td>
</tr>
<tr>
<td>Faculty Services</td>
<td></td>
</tr>
<tr>
<td>480-727-9900</td>
<td></td>
</tr>
</tbody>
</table>
Complete Part 2 of the I-9 at one of these ASU locations

<table>
<thead>
<tr>
<th>Campus</th>
<th>Location</th>
<th>Office Hours</th>
<th>Contact Info</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>International</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Tempe</td>
<td>OHR Front Desk</td>
<td>Monday–Friday 8 a.m. – 4:30 p.m.</td>
<td>855-278-5081 <a href="mailto:hresc@asu.edu">hresc@asu.edu</a></td>
</tr>
<tr>
<td></td>
<td>1100 E. University Drive UCENTRA Bldg. A Tempe, AZ 85287</td>
<td></td>
<td></td>
</tr>
<tr>
<td>West</td>
<td>OHR Front Desk</td>
<td>Monday, Wednesday, Thursday 8 a.m. – 5 p.m.</td>
<td>855-278-5081 <a href="mailto:hresc@asu.edu">hresc@asu.edu</a></td>
</tr>
<tr>
<td></td>
<td>4701 W. Thunderbird Rd. FAB S352C Glendale, AZ 85306</td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Domestic</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Downtown</td>
<td>OHR Front Desk</td>
<td>Monday 9 a.m. – 4 p.m.</td>
<td>855-278-5081 <a href="mailto:hresc@asu.edu">hresc@asu.edu</a></td>
</tr>
<tr>
<td></td>
<td>511 N. Central Ave. Post Office Bldg., Suite 245 Phoenix, AZ 85004</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>112 N. Central Ave. Heard Bldg., 7th Floor Phoenix, AZ 85004</td>
<td></td>
<td>602-496-0274 <a href="mailto:Pat.Adler@asu.edu">Pat.Adler@asu.edu</a> 602-496-0421 <a href="mailto:Shimara.Mizell@asu.edu">Shimara.Mizell@asu.edu</a></td>
</tr>
<tr>
<td></td>
<td>500 N. 3rd St. Room 434/455/456 Phoenix, AZ 85004</td>
<td>Monday–Friday 9 a.m. – 4 p.m. (By appointment only)</td>
<td>602-496-2296 <a href="mailto:Margaret.serros@asu.edu">Margaret.serros@asu.edu</a></td>
</tr>
<tr>
<td></td>
<td>555 N. Central Ave. Suite 500, Room 502 Phoenix, AZ 85004</td>
<td>Monday–Friday 9 a.m. – 4 p.m. (By appointment only)</td>
<td>602-496-2860 <a href="mailto:Gretchen.williams@asu.edu">Gretchen.williams@asu.edu</a></td>
</tr>
<tr>
<td>Polytechnic</td>
<td></td>
<td></td>
<td>480-727-1085 <a href="mailto:hresc@asu.edu">hresc@asu.edu</a></td>
</tr>
<tr>
<td></td>
<td>OHR Front Desk</td>
<td>Tuesday–Wednesday 8 a.m. – 2 p.m. Call for availability</td>
<td></td>
</tr>
<tr>
<td></td>
<td>6027 S. Sagewood Ironwood Bldg., Room 102 Mesa, AZ 85212</td>
<td></td>
<td>480-727-5269 <a href="mailto:Sandra.davison@asu.edu">Sandra.davison@asu.edu</a></td>
</tr>
<tr>
<td></td>
<td>6049 S. Backus Mall Sutton Hall, Suite 240 Mesa, AZ 85212</td>
<td>Monday–Friday 8 a.m. – 5 p.m.</td>
<td>480-727-5439 <a href="mailto:Stephanie.rack@asu.edu">Stephanie.rack@asu.edu</a></td>
</tr>
<tr>
<td></td>
<td>6049 S. Backus Mall Sutton Hall, Suite 140 Mesa, AZ 85212</td>
<td>Monday–Friday 8 a.m. – 5 p.m.</td>
<td></td>
</tr>
<tr>
<td></td>
<td>5909 S Sterling Mall Administration Building Room 160 Mesa, AZ 85212</td>
<td>Monday–Friday 8:15 a.m. – 4:30 p.m.</td>
<td>480-727-1503 <a href="mailto:Joanna.lawrence@asu.edu">Joanna.lawrence@asu.edu</a></td>
</tr>
<tr>
<td>Tempe</td>
<td>OHR Front Desk</td>
<td>Monday–Friday 8 a.m. – 4:30 p.m.</td>
<td>855-278-5081 <a href="mailto:hresc@asu.edu">hresc@asu.edu</a></td>
</tr>
<tr>
<td></td>
<td>1100 E. University Drive UCENTRA Building A Tempe, AZ 85287</td>
<td></td>
<td></td>
</tr>
<tr>
<td>West</td>
<td>OHR Front Desk</td>
<td>Monday, Wednesday, Thursday 8 a.m. – 5 p.m.</td>
<td>855-278-5081 <a href="mailto:hresc@asu.edu">hresc@asu.edu</a></td>
</tr>
<tr>
<td></td>
<td>4701 W. Thunderbird Rd. FAB S352C Glendale, AZ 85306</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
# Lists of Acceptable Documents

All documents must be UNEXPIRED

Employees may present one selection from List A or a combination of one selection from List B and one selection from List C.

<table>
<thead>
<tr>
<th>List A</th>
<th>Documents that Establish Both Identity and Employment Authorization</th>
<th>OR</th>
<th>List B</th>
<th>Documents that Establish Identity AND</th>
<th>List C</th>
<th>Documents that Establish Employment Authorization</th>
</tr>
</thead>
<tbody>
<tr>
<td>1.</td>
<td>U.S. Passport or U.S. Passport Card</td>
<td></td>
<td>1.</td>
<td>Driver’s license or ID card issued by a State or proving possession of the United States, provided it contains a photograph or information such as name, date of birth, gender, height, eye color, and address</td>
<td></td>
<td></td>
</tr>
<tr>
<td>2.</td>
<td>Permanent Resident Card or Alien Registration Receipt Card (Form I-551)</td>
<td></td>
<td>2.</td>
<td>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</td>
<td></td>
<td></td>
</tr>
<tr>
<td>3.</td>
<td>Foreign passport that contains a temporary I-551 stamp or temporary I-551 printed notation on a machine-readable immigrant visa</td>
<td></td>
<td>3.</td>
<td>School ID card with a photograph</td>
<td></td>
<td></td>
</tr>
<tr>
<td>4.</td>
<td>Employment Authorization Document that contains a photograph (Form I-796)</td>
<td></td>
<td>4.</td>
<td>Voter’s registration card</td>
<td></td>
<td></td>
</tr>
<tr>
<td>5.</td>
<td>For a nonimmigrant alien authorized to work for a specific employer because of his or her status:</td>
<td></td>
<td>5.</td>
<td>U.S. Military card or draft record</td>
<td></td>
<td></td>
</tr>
<tr>
<td>a.</td>
<td>Foreign passport, and</td>
<td></td>
<td>6.</td>
<td>Military dependent’s ID card</td>
<td></td>
<td></td>
</tr>
<tr>
<td>b.</td>
<td>Form I-94 or Form I-94A that has the following:</td>
<td></td>
<td>7.</td>
<td>U.S. Coast Guard Merchant Mariner Card</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>(1) The same name as the passport; and</td>
<td></td>
<td>8.</td>
<td>Native American tribal document</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>(2) An endorsement of the alien’s nonimmigrant status as long as that period of endorsement has not yet expired and the proposed employment is not in conflict with any restrictions or limitations identified on the form</td>
<td></td>
<td>9.</td>
<td>Driver’s license issued by a Canadian government authority</td>
<td></td>
<td></td>
</tr>
<tr>
<td>6.</td>
<td>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</td>
<td></td>
<td>For persons under age 18 who are unable to present a document listed above:</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>10. School record or report card</td>
<td></td>
<td>10.</td>
<td>School record or report card</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>11. Clinic, doctor, or hospital record</td>
<td></td>
<td>11.</td>
<td>Clinic, doctor, or hospital record</td>
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<tr>
<td></td>
<td>12. Day-care or nursery school record</td>
<td></td>
<td>12.</td>
<td>Day-care or nursery school record</td>
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</tbody>
</table>

Illustrations of many of these documents appear in Part 8 of the Handbook for Employers (M-274).

Refer to Section 2 of the instructions, titled "Employer or Authorized Representative Review and Verification," for more information about acceptable receipts.

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New Health Insurance Marketplace Coverage Options and Your Health Coverage

General Information
When key parts of the health care reform law (the Affordable Care Act or ACA) take effect in 2014, there will be a new way to buy health insurance: through the health insurance marketplace. To assist you as you evaluate options for you and your family, this notice provides some basic information about the new marketplaces and employment based health coverage offered by your employer.

What is the health insurance marketplace?
The marketplace is designed to help you find health insurance that meets your needs and fits your budget. The marketplace offers "one-stop shopping" to find and compare private health insurance options. You can enroll for health insurance coverage through the Marketplace during an enrollment period that begins in October 2013. Coverage can begin as early as January 1, 2014.

Can I save money on my health insurance premiums in the marketplace?
If you’re eligible for coverage through your employer, you most likely will not be eligible for the subsidy through the marketplace because the State of Arizona Benefit Options Plan meets ACA requirements for minimum value and employee-only coverage is intended to be affordable. However, if you’re not eligible for medical coverage through your employer or if the lowest cost plan from the State of Arizona Benefit Options that would cover you (and not any other members of your family) is more than 9.5% of your household income for the year, you may be eligible for a subsidy that lowers your monthly premium for coverage purchased through the marketplace.

Please note: The marketplace will use your household income, along with other factors, to determine whether you may be eligible for a premium discount. If, for example, your wages vary from week to week (perhaps you are an hourly employee or you work on a commission basis), if you are newly employed mid-year, or if you have other income losses, you may still qualify for a subsidy.

Alternatively, you may qualify for Medicaid depending on your household income. Please visit www.HealthCare.gov for more information.

How will enrolling in the marketplace affect health coverage through my employer?
If you purchase a health plan through the marketplace instead of enrolling for health coverage offered by your employer, you will lose any employer contribution to the State of Arizona Benefit Options Plan. Future enrollment in the State of Arizona Benefit Options Plan will be limited to open enrollment (which typically happens in the fall).

How can I get more information?
For more information about your coverage offered by your employer, please check your summary plan description or contact Office of Human Resources Employee Service Center contact information included in employer information chart.

The marketplace can help you evaluate your coverage options, including your eligibility for coverage through the marketplace and its cost. Visit http://www.HealthCare.gov for more information, including an online application for health insurance coverage and a Health Insurance Marketplace in your area.
New Health Insurance Marketplace Coverage Options and Your Health Coverage

Information about health coverage offered by your employer
If you decide to complete an application for coverage in the marketplace, you will be asked to provide the information included in the chart below. This employer information is numbered to correspond to the marketplace application.

If you decide to shop for coverage in the marketplace, http://www.HealthCare.gov will guide you through the process. The employer information you can enter when you visit www.HealthCare.gov will help you determine if you can get a subsidy (in the form of a tax credit) to lower your monthly premiums for coverage purchased through the marketplace.

Here is some basic information about health coverage offered by this employer:

- As your employer, we offer a health plan to some employees and dependents. Eligible employees and dependents are:

  Defined in the EPO, PPO and HSA plan descriptions (Article 2 Eligibility and Participation) posted on the Benefit Options website www.benefitoptions.az.gov

- This coverage provided meets the minimum value standard, and the cost of this coverage is intended to be affordable.

Employer Information

<table>
<thead>
<tr>
<th>Employer Name</th>
<th>Employer Identification Number (EIN)</th>
</tr>
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<tbody>
<tr>
<td>Arizona State University</td>
<td>86-0196696</td>
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<table>
<thead>
<tr>
<th>Employer Address</th>
<th>Employer Phone Number</th>
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</thead>
<tbody>
<tr>
<td>PO BOX 871304</td>
<td>(855) 278-5081</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>City</th>
<th>State</th>
</tr>
</thead>
<tbody>
<tr>
<td>Tempe</td>
<td>AZ</td>
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<table>
<thead>
<tr>
<th>Zip Code</th>
<th>E-mail Address</th>
</tr>
</thead>
<tbody>
<tr>
<td>85287-1304</td>
<td><a href="mailto:HRESC@asu.edu">HRESC@asu.edu</a></td>
</tr>
</tbody>
</table>

10. Who can we contact about employee health coverage at this job?
Human Resources Employee Service Center
The primary focus for any ASU student is their education. ASU recognizes that some students may need to supplement their income with on-campus work in order to help fund their education. To ensure that student’s education and training are not compromised by commitments to additional employment, the following ASU employment guidelines must be followed:

**For graduate students**

- Students holding assistantships or graduate intern appointments during the academic year may work a maximum of 0.50 FTE. During the summer, these students may work a maximum of 1.00 FTE.

- Students holding hourly student worker positions during the academic year may work a maximum of 25 hours per week. During the summer, these students may work up to a maximum of 40 hours per week.

- All positions combined (including stipend-paid positions) cannot exceed 0.625 FTE or 25 hours per week for the first 12 months of employment or from October to October in subsequent years of employment.

**Some important areas to think about**

- If you average more than 0.625 FTE or 25 hours per week, your employment will be terminated from all ASU jobs.

- If you are terminated for exceeding the 0.625 FTE / 25-hour weekly maximum, you are not eligible for rehire at ASU in a student worker, faculty associate or graduate student position for at least 26 weeks.

**For undergraduate students**

- Student employees are limited to a rolling average of 25 hours per week per year.

- Students can work up to 100 percent in the summer, provided they do not exceed an average of 25 hours per week for the first 12 months of ASU employment or from October to October in subsequent years of employment.

- This 25-hour average maximum applies to the combined total of all jobs, including hours associated with stipend-based compensation.

**Some important areas to think about**

- If you average more than 25 hours per week, you will be terminated from all ASU jobs.

- If you are terminated for exceeding the 25-hour weekly maximum, you are not eligible for rehire at ASU in an undergraduate or graduate student position for at least 26 weeks.

Please help us minimize any disruption to your education, employment experience and, if applicable, your graduate assistantship or graduate intern appointment by being mindful of your total ASU employment hours.

If you have any questions regarding your hours, please contact your supervisor or the hiring manager for your department.

*Effective May 2014*