CARTHAGE COLLEGE

# Student Educational Experience Award Agreement

For the period: May 25, 2020 thru August 27, 2020

**TO BE COMPLETED BY THE STUDENT:**

I understand that I have the following responsibilities as a student educational experience awardee at Carthage**:**

1. **Paperwork-** Before I may begin this project, I understand that my Student Educational Experience Agreement must be complete and submitted to the Human Resources Office, on or before my first day of work. I must also provide complete page 1 of the Federal I-9 form, the direct deposit form, as well as updated federal and state tax Employee Withholding Allowance Certificates (Federal W-4 Form and State WT-4 Form). I understand that I will be contacted by the HR Department at a later date and be required to present in person original and unexpired documents necessary for the completion of the Federal I-9 form. If I am under the age of 16, I will need to provide a work permit.
2. **Employment-** I understand that I cannot be employed by the College during the same time period I hold an Educational Experience Award (June-August), and that I must be a full-time degree candidate at Carthage at the time of my award.
3. **Award Letter-** I am responsible for completing and adhering to the specific terms outlined in my individual award letter.
4. **Award Payments-** The payment for this award is considered taxable income to the student, but ***wages are not subject to FICA and Medicare withholding***. This award is considered a Non-Qualified Scholarship/Fellowship (Potentially Taxable): Payments that are not used towards tuition, fees, books, supplies or equipment are considered non-qualified. Payments are potentially subject to income tax withholding and are reported to the IRS. I understand that I will receive a W-2 from Carthage College that indicates all monies awarded to me and these payments are potentially subject to income tax. The student is responsible for maintaining records for payments and for reporting non-qualified payments to the IRS. Examples include travel, housing, meals, optional fees.
5. **Exemption of Federal and State Withholding Taxes:** Students that are exempt from Federal and State Withholding taxes must still complete the forms. If a student wants to claim exemption, please write "exempt" on Form W-4 in the space below Step 4(c) and complete Steps 1 and 5. To claim exemption from State withholding, complete the Wisconsin WT-4 and write "exempt" on line 3. Please make sure to sign and date each form. The IRS requires employees that claim exemption status from Federal withholding taxes to complete a new W-4 every calendar year . The HR Department will contact you.
6. **Payment:** All payments will be direct deposit. To ensure correct and accurate deposit, I am required to have direct deposit set up or need to provide the documents required for this arrangement. I will provide a complete and accurate form as well as provide either a) a voided check or b) memo from the bank providing the routing and account number. Payment will come in the form of two payments, one to be dispersed at the beginning of June and the 2nd to be dispersed at the beginning of July unless an alternative schedule for payment is noted in your award letter. Payments cannot be awarded until all paperwork is submitted. Please allow five (5) business days for processing.
7. **Housing & Meals-** Some Educational Experience Awards include housing and meals as a part of the award, refer to your individual award letter for details.

**CONFIDENTIALITY STATEMENT**

As a student employee of Carthage College, you may have access to information that is made confidential by federal law, such as the Family Educational Rights and Privacy Act, 20 U.S.C. § 1232g, state law, or other College rules or regulations. It is imperative that you maintain the confidentiality of that information. All members of the Carthage College Community have the right to expect that all other members, in whatever role they may function, will respect their privacy and never disclose information in an inappropriate manner. Each employee is personally responsible for the protection of all information to which they have access at Carthage College.

Student Name: _____ Student ID: _____

Student E-Mail: _____ Student Phone: _____

Permanent Home Address: _____

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**ACKNOWLEDGEMENT**

I hereby certify that I have read the above responsibilities and confidentiality statement and fully understand and agree with the expectations and terms of my Student Educational Experience Award. I am aware that failure to comply with any of the above conditions, or those conditions listed in my award letter, may result in disciplinary action being taken against me, including termination of the award.

**Student's Signature:**_____**Date:** _____