Adjunct Appointment Checklist

Please be sure to provide the Penn Law Business Affairs team with the following documents to complete your payroll record:

- Signed Offer Letter and/or Appointment Form
- W4
- Employment Information Form
- Online I-9 Form (including verification documents)
- Online Direct Deposit Declaration
- Voluntary Self Identification Form
- Copy of Social Security Card
- Resume

Please submit these materials in one complete package to the Business Affairs team at: businesshelp@law.upenn.edu and by the dates indicated, in order to expedite the processing of your payroll record.

Penn Law
UNIVERSITY of PENNSYLVANIA LAW SCHOOL

3501 Sansom Street
Philadelphia, PA 19104-6204

To Law School Lecturers and Adjunct Professors:

Attached are the forms needed to process payment of teaching fees this semester. Although the packet contains five forms, your individual situation may necessitate completion of only one or two forms. If you received payment for teaching last year or if payment is to be made to your employer, you need only complete the "Request for Payment" form. If you did not receive payment for teaching last year, you must complete all of the forms.

Please return the appropriate form(s) to my attention no later than **November 1st for Fall** semester payments or **March 1st for Spring** semester payments.

REQUEST FOR PAYMENT OF TEACHING FEES: This form must be completed by all teachers. This will tell us what payment procedure you are choosing. If payment is to be made directly to you, please note that the University of Pennsylvania no longer issues paper paychecks – options are listed below. If payment is to be made to your employer, be sure to have your employer send me a formal invoice for your teaching services.

PAYROLL DOCUMENTS: The University requires the signed offer letter returned as well as a photocopy of your Social Security card to complete your payroll record - please bring your card for us to copy. Also, payroll can only be processed via direct deposit or by default to the ADP TotalPay debit card system - as the university no longer issues paper checks. If you have not already done so, we suggest that you sign up for direct deposit as soon as possible using the following instructions:

Please go to the 'U@Penn' employee webpage - here:https://portal.apps.upenn.edu/penn_portal/u@penn.php

*Then, on the left-hand side, under the heading '**My Pay**,' click on '**Enroll in or Update Direct Deposit**.' This is where you enter your banking information to initiate direct deposit, and you can also update your banking information here if it changes. This will require a pennID and password.*

EMPLOYEE INFORMATION FORM: This form must be completed by all teachers. This will assist us with the information required to start and complete your payroll record.

FORM W-4: This form will determine the tax withholding rate for your payment. If you received payment for teaching last year, you need to complete this form only if you wish to change your tax withholding rate or permanent home address. This is the address that will be used to mail your W¬2 tax form. If your fee is to be paid directly to your employer, this form is not necessary.

ONLINE FORM 1-9: Unless you have been on the University Payroll system within the last year, you must complete this form on-line at https://www.hr.upenn.edu/I9. The I9 form requires that you present documentation that proves your identity and eligibility for employment. The attached form lists the most common forms of documentation to be used. You must bring this documentation with you when you hand in your forms. If you have been on Payroll at the University within the past year, you do not have to complete the I‑9 form, but you must let us know in which department you last worked so that we can get your payroll records transferred to the Law School. [NOTE: Use the same address as the W-4 form.]

SELF IDENTIFICATION FORM: We ask your assistance in helping us to meet our federal compliance obligations of monitoring our hire and transfer processes. Completion of this form is strictly voluntary. The information you provide on this form will be maintained confidentially.

Finally, all forms can be obtained electronically from the Business Affairs section of the Penn Law website at:

https://www.law.upenn.edu/administration/businessaffairs/adjuncts.php

Instructions for Setting Up Direct Deposit at Penn

1. Please go to the 'U@Penn' employee webpage - here:

https://portal.apps.upenn.edu/penn_portal/u@penn.php



2. Then, on the left-hand side, under the heading **'My Pay**,' click on 'Enroll in or Update Direct Deposit.' (AS PER ABOVE) This is where you enter your banking information to initiate direct deposit, and you can also update your banking information here if it changes.

3. ***Please note that this will require a pennID and password.***

REQUEST FOR PAYMENT OF TEACHING FEES

Please complete this form and return (preferably by email) to:

Dallas A. Grundy
Vice Dean for Business Affairs
University of Pennsylvania Law School
3501 Sansom Street
Philadelphia, PA 19104-6204
Fax: 215-746-8266 Email: businesshelp@law.upenn.edu

==========

NAME: _____

COURSE TITLE: _____

SEMESTER TAUGHT: CIRCLE ONE--> SUMMER FALL SPRING YEARLONG

AMOUNT OF PAYMENT: _____

METHOD OF PAYMENT (CHECK ONE OF THE FOLLOWING):

☐ I waive payment of the teaching fee for this course
Note: You only need to return this form.
(YOU WILL BE ACKNOWLEDGED FOR THE DONATION OF YOUR TEACHING SERVICES IN THE NEXT PUBLICATION OF THE LAW SCHOOL ANNUAL REPORT OF DONORS)

☐ Teaching fee will be billed by and paid to my employer
Note: You only need to return this form, pending receipt of your employer invoice.
(INVOICE SHOULD BE SENT TO THE ABOVE ADDRESS)

☐ Payment is to be made to me
Note: Please see the instructions below for payment to individuals

SIGNATURE -->_____ DATE-->_____

Payment to individuals (payroll transaction):

If you have received payment of a teaching stipend from Penn within the past year, then you only need to return this one page form. If you would like to change the tax withholding rate that applied to a payment in the past year, you should also complete the attached W-4 form.

If you have not been paid by Penn within the last year, then you must complete all of the forms attached to this Request for Payment. You must also complete the required **ONLINE** I-9 form, located here: https://hrx.talx.com/HRX/EmploymentCenter/Anonymous.aspx as well as the appropriate documentation, i.e., one item from list A or one item from each of both list B & list C included in this packet.

NOTE: The University of Pennsylvania no longer issues paper paychecks. Payment will be made to a Pay Debit Card or by Direct Deposit to your bank account. Please see the cover email for instructions on how to sign up for direct deposit or access the Pay Card account. If you received a prior payment in the past 6 months via Direct Deposit, that payment method will continue and you do not need to do anything further, unless you changed your bank account since the last payment.

Employee Information Form

Social Security Number (last four digits): XXX-XX-_____

Name: First: _____ Initial: _____ Last: _____

Name Suffix: _____ Name Prefix: _____

Current Address: (Cannot be an office address)

Street/Apartment: _____

Street 2: _____

City: _____ State: _____ Zip Code: _____

Home Phone: _____ Cell Phone: _____

Permanent Address (Domicile): (Cannot be an office address)

Street/Apartment: _____

Street 2: _____

City: _____ State: _____ Zip Code: _____

Country: _____ **(Leave blank if USA)**

Emergency Contact Information:

Name: _____ Relationship: _____

Phone where this person can be reached while you are at work: _____

Sex: _____ Date of Birth: _____ Marital Status: _____

Educational Level: _____ Year received: _____
(choose code from below)

B - No academic credentials.
C - High School Diploma or equivalent.
D - Trade Certificate.
E - Some College.
F - Associate Degree.
G - Bachelor's Degree.
H - Master's Degree.
I - Medical Doctorate (M.D., D.D.S., D.V.M., V.M.D.).
J - Other Doctorate (Dr. of Educ., Dr. of Sct., LL.D., J.D.).
K - Doctor of Philosophy (Ph.D.).

Non-Resident Aliens:

Visa Type: _____ Country: _____ Visa Expiration Date: _____

Form W-4 (2016)

Purpose. Complete Form W-4 so that your employer can withhold the correct federal income tax from your pay. Consider completing a new Form W-4 each year and when your personal or financial situation changes.

Exemption from withholding. If you are exempt, complete **only** lines 1, 2, 3, 4, and 7 and sign the form to validate it. Your exemption for 2016 expires February 15, 2017. See Pub. 505, Tax Withholding and Estimated Tax.

Note: If another person can claim you as a dependent on his or her tax return, you cannot claim exemption from withholding if your income exceeds $1,050 and includes more than $350 of unearned income (for example, interest and dividends).

Exceptions. An employee may be able to claim exemption from withholding even if the employee is a dependent, if the employee:

- Is age 65 or older,
- Is blind, or
- Will claim adjustments to income; tax credits; or itemized deductions, on his or her tax return.

The exceptions do not apply to supplemental wages greater than $1,000,000.

Basic instructions. If you are not exempt, complete the **Personal Allowances Worksheet** below. The worksheets on page 2 further adjust your withholding allowances based on itemized deductions, certain credits, adjustments to income, or two-earners/multiple jobs situations.

Complete all worksheets that apply. However, you may claim fewer (or zero) allowances. For regular wages, withholding must be based on allowances you claimed and may not be a flat amount or percentage of wages.

Head of household. Generally, you can claim head of household filing status on your tax return only if you are unmarried and pay more than 50% of the costs of keeping up a home for yourself and your dependent(s) or other qualifying individuals. See Pub. 501, Exemptions, Standard Deduction, and Filing Information, for information.

Tax credits. You can take projected tax credits into account in figuring your allowable number of withholding allowances. Credits for child or dependent care expenses and the child tax credit may be claimed using the **Personal Allowances Worksheet** below. See Pub. 505 for information on converting your other credits into withholding allowances.

Nonwage income. If you have a large amount of nonwage income, such as interest or dividends, consider making estimated tax payments using Form 1040-ES, Estimated Tax for Individuals. Otherwise, you may owe additional tax. If you have pension or annuity income, see Pub. 505 to find out if you should adjust your withholding on Form W-4 or W-4P.

Two earners or multiple jobs. If you have a working spouse or more than one job, figure the total number of allowances you are entitled to claim on all jobs using worksheets from only one Form W-4. Your withholding usually will be most accurate when all allowances are claimed on the Form W-4 for the highest paying job and zero allowances are claimed on the others. See Pub. 505 for details.

Nonresident alien. If you are a nonresident alien, see Notice 1392, Supplemental Form W-4 Instructions for Nonresident Aliens, before completing this form.

Check your withholding. After your Form W-4 takes effect, use Pub. 505 to see how the amount you are having withheld compares to your projected total tax for 2016. See Pub. 505, especially if your earnings exceed $130,000 (Single) or $180,000 (Married).

Future developments. Information about any future developments affecting Form W-4 (such as legislation enacted after we release it) will be posted at *www.irs.gov/w4*.

Personal Allowances Worksheet (Keep for your records.)

A	Enter "1" for **yourself** if no one else can claim you as a dependent	**A** _____
B	Enter "1" if: • You are single and have only one job; or • You are married, have only one job, and your spouse does not work; or • Your wages from a second job or your spouse's wages (or the total of both) are $1,500 or less.	**B** _____
C	Enter "1" for your **spouse.** But, you may choose to enter "-0-" if you are married and have either a working spouse or more than one job. (Entering "-0-" may help you avoid having too little tax withheld.)	**C** _____
D	Enter number of **dependents** (other than your spouse or yourself) you will claim on your tax return	**D** _____
E	Enter "1" if you will file as **head of household** on your tax return (see conditions under **Head of household** above)	**E** _____
F	Enter "1" if you have at least $2,000 of **child or dependent care expenses** for which you plan to claim a credit (**Note:** Do **not** include child support payments. See Pub. 503, Child and Dependent Care Expenses, for details.)	**F** _____
G	**Child Tax Credit** (including additional child tax credit). See Pub. 972, Child Tax Credit, for more information. • If your total income will be less than $70,000 ($100,000 if married), enter "2" for each eligible child; then **less** "1" if you have two to four eligible children or **less** "2" if you have five or more eligible children. • If your total income will be between $70,000 and $84,000 ($100,000 and $119,000 if married), enter "1" for each eligible child	**G** _____
H	Add lines A through G and enter total here. (**Note:** This may be different from the number of exemptions you claim on your tax return.) ►	**H** _____

For accuracy, complete all worksheets that apply.

- If you plan to **itemize** or **claim adjustments to income** and want to reduce your withholding, see the **Deductions and Adjustments Worksheet** on page 2.
- If you are **single and have more than one job** or are **married and you and your spouse both work** and the combined earnings from all jobs exceed $50,000 ($20,000 if married), see the **Two-Earners/Multiple Jobs Worksheet** on page 2 to avoid having too little tax withheld.
- If **neither** of the above situations applies, **stop here** and enter the number from line H on line 5 of Form W-4 below.

---------- **Separate here and give Form W-4 to your employer. Keep the top part for your records.** ----------

Form **W-4**
Department of the Treasury
Internal Revenue Service

Employee's Withholding Allowance Certificate

► **Whether you are entitled to claim a certain number of allowances or exemption from withholding is subject to review by the IRS. Your employer may be required to send a copy of this form to the IRS.**

OMB No. 1545-0074

2016

1	Your first name and middle initial	Last name	**2** **Your social security number**
	Home address (number and street or rural route)	**3** ☐ Single ☐ Married ☐ Married, but withhold at higher Single rate. **Note:** If married, but legally separated, or spouse is a nonresident alien, check the "Single" box.	
	City or town, state, and ZIP code	**4** **If your last name differs from that shown on your social security card, check here. You must call 1-800-772-1213 for a replacement card.** ► ☐	
5	Total number of allowances you are claiming (from line **H** above **or** from the applicable worksheet on page 2)	**5**	
6	Additional amount, if any, you want withheld from each paycheck	**6** $	
7	I claim exemption from withholding for 2016, and I certify that I meet **both** of the following conditions for exemption. • Last year I had a right to a refund of **all** federal income tax withheld because I had **no** tax liability, **and** • This year I expect a refund of **all** federal income tax withheld because I expect to have **no** tax liability. If you meet both conditions, write "Exempt" here ►	**7**	

Under penalties of perjury, I declare that I have examined this certificate and, to the best of my knowledge and belief, it is true, correct, and complete.

Employee's signature
(This form is not valid unless you sign it.) ► **Date** ►

8	Employer's name and address (Employer: Complete lines 8 and 10 only if sending to the IRS.)	**9** Office code (optional)	**10** Employer identification number (EIN)

Deductions and Adjustments Worksheet

Note: Use this worksheet *only* if you plan to itemize deductions or claim certain credits or adjustments to income.

1	Enter an estimate of your 2016 itemized deductions. These include qualifying home mortgage interest, charitable contributions, state and local taxes, medical expenses in excess of 10% (7.5% if either you or your spouse was born before January 2, 1952) of your income, and miscellaneous deductions. For 2016, you may have to reduce your itemized deductions if your income is over $311,300 and you are married filing jointly or are a qualifying widow(er); $285,350 if you are head of household; $259,400 if you are single and not head of household or a qualifying widow(er); or $155,650 if you are married filing separately. See Pub. 505 for details	1	$
2	Enter: { $12,600 if married filing jointly or qualifying widow(er); $9,300 if head of household; $6,300 if single or married filing separately }	2	$
3	**Subtract** line 2 from line 1. If zero or less, enter "-0-"	3	$
4	Enter an estimate of your 2016 adjustments to income and any additional standard deduction (see Pub. 505)	4	$
5	**Add** lines 3 and 4 and enter the total. (Include any amount for credits from the *Converting Credits to Withholding Allowances for 2016 Form W-4* worksheet in Pub. 505.)	5	$
6	Enter an estimate of your 2016 nonwage income (such as dividends or interest)	6	$
7	**Subtract** line 6 from line 5. If zero or less, enter "-0-"	7	$
8	**Divide** the amount on line 7 by $4,050 and enter the result here. Drop any fraction	8	
9	Enter the number from the **Personal Allowances Worksheet,** line H, page 1	9	
10	**Add** lines 8 and 9 and enter the total here. If you plan to use the **Two-Earners/Multiple Jobs Worksheet,** also enter this total on line 1 below. Otherwise, **stop here** and enter this total on Form W-4, line 5, page 1	10	

Two-Earners/Multiple Jobs Worksheet (See *Two earners or multiple jobs* on page 1.)

Note: Use this worksheet *only* if the instructions under line H on page 1 direct you here.

1	Enter the number from line H, page 1 (or from line 10 above if you used the **Deductions and Adjustments Worksheet**)	1	
2	Find the number in **Table 1** below that applies to the **LOWEST** paying job and enter it here. **However,** if you are married filing jointly and wages from the highest paying job are $65,000 or less, do not enter more than "3"	2	
3	If line 1 is **more than or equal to** line 2, subtract line 2 from line 1. Enter the result here (if zero, enter "-0-") and on Form W-4, line 5, page 1. **Do not** use the rest of this worksheet	3	

Note: If line 1 is **less than** line 2, enter "-0-" on Form W-4, line 5, page 1. Complete lines 4 through 9 below to figure the additional withholding amount necessary to avoid a year-end tax bill.

4	Enter the number from line 2 of this worksheet	4	
5	Enter the number from line 1 of this worksheet	5	
6	**Subtract** line 5 from line 4	6	
7	Find the amount in **Table 2** below that applies to the **HIGHEST** paying job and enter it here	7	$
8	**Multiply** line 7 by line 6 and enter the result here. This is the additional annual withholding needed	8	$
9	Divide line 8 by the number of pay periods remaining in 2016. For example, divide by 25 if you are paid every two weeks and you complete this form on a date in January when there are 25 pay periods remaining in 2016. Enter the result here and on Form W-4, line 6, page 1. This is the additional amount to be withheld from each paycheck	9	$

Table 1

Married Filing Jointly		All Others	
If wages from **LOWEST** paying job are—	Enter on line 2 above	If wages from **LOWEST** paying job are—	Enter on line 2 above
$0 - $6,000	0	$0 - $9,000	0
6,001 - 14,000	1	9,001 - 17,000	1
14,001 - 25,000	2	17,001 - 26,000	2
25,001 - 27,000	3	26,001 - 34,000	3
27,001 - 35,000	4	34,001 - 44,000	4
35,001 - 44,000	5	44,001 - 75,000	5
44,001 - 55,000	6	75,001 - 85,000	6
55,001 - 65,000	7	85,001 - 110,000	7
65,001 - 75,000	8	110,001 - 125,000	8
75,001 - 80,000	9	125,001 - 140,000	9
80,001 - 100,000	10	140,001 and over	10
100,001 - 115,000	11		
115,001 - 130,000	12		
130,001 - 140,000	13		
140,001 - 150,000	14		
150,001 and over	15		

Table 2

Married Filing Jointly		All Others	
If wages from **HIGHEST** paying job are—	Enter on line 7 above	If wages from **HIGHEST** paying job are—	Enter on line 7 above
$0 - $75,000	$610	$0 - $38,000	$610
75,001 - 135,000	1,010	38,001 - 85,000	1,010
135,001 - 205,000	1,130	85,001 - 185,000	1,130
205,001 - 360,000	1,340	185,001 - 400,000	1,340
360,001 - 405,000	1,420	400,001 and over	1,600
405,001 and over	1,600		

Privacy Act and Paperwork Reduction Act Notice. We ask for the information on this form to carry out the Internal Revenue laws of the United States. Internal Revenue Code sections 3402(f)(2) and 6109 and their regulations require you to provide this information; your employer uses it to determine your federal income tax withholding. Failure to provide a properly completed form will result in your being treated as a single person who claims no withholding allowances; providing fraudulent information may subject you to penalties. Routine uses of this information include giving it to the Department of Justice for civil and criminal litigation; to cities, states, the District of Columbia, and U.S. commonwealths and possessions for use in administering their tax laws; and to the Department of Health and Human Services for use in the National Directory of New Hires. We may also disclose this information to other countries under a tax treaty, to federal and state agencies to enforce federal nontax criminal laws, or to federal law enforcement and intelligence agencies to combat terrorism.

You are not required to provide the information requested on a form that is subject to the Paperwork Reduction Act unless the form displays a valid OMB control number. Books or records relating to a form or its instructions must be retained as long as their contents may become material in the administration of any Internal Revenue law. Generally, tax returns and return information are confidential, as required by Code section 6103.

The average time and expenses required to complete and file this form will vary depending on individual circumstances. For estimated averages, see the instructions for your income tax return.

If you have suggestions for making this form simpler, we would be happy to hear from you. See the instructions for your income tax return.

LISTS OF ACCEPTABLE DOCUMENTS

All documents must be unexpired

LIST A **Documents that Establish Both Identity and Employment Authorization**	OR	LIST B **Documents that Establish Identity**	AND	LIST C **Documents that Establish Employment Authorization**
1. U.S. Passport or U.S. Passport Card		**1.** Driver's license or ID card issued by a State or outlying possession of the United States provided it contains a photograph or information such as name, date of birth, gender, height, eye color, and address		**1.** Social Security Account Number card other than one that specifies on the face that the issuance of the card does not authorize employment in the United States
2. Permanent Resident Card or Alien Registration Receipt Card (Form I-551)				**2.** Certification of Birth Abroad issued by the Department of State (Form FS-545)
3. Foreign passport that contains a temporary I-551 stamp or temporary I-551 printed notation on a machine-readable immigrant visa		**2.** 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		**3.** Certification of Report of Birth issued by the Department of State (Form DS-1350)
4. Employment Authorization Document that contains a photograph (Form I-766)		**3.** School ID card with a photograph		
		4. Voter's registration card		**4.** Original or certified copy of birth certificate issued by a State, county, municipal authority, or territory of the United States bearing an official seal
5. In the case of a nonimmigrant alien authorized to work for a specific employer incident to status, a foreign passport with Form I-94 or Form I-94A bearing the same name as the passport and containing an endorsement of the alien's nonimmigrant status, as long as the period of endorsement has not yet expired and the proposed employment is not in conflict with any restrictions or limitations identified on the form		**5.** U.S. Military card or draft record		
		6. Military dependent's ID card		
		7. U.S. Coast Guard Merchant Mariner Card		**5.** Native American tribal document
		8. Native American tribal document		**6.** U.S. Citizen ID Card (Form I-197)
		9. Driver's license issued by a Canadian government authority		
6. 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		**For persons under age 18 who are unable to present a document listed above:**		**7.** Identification Card for Use of Resident Citizen in the United States (Form I-179)
		10. School record or report card		**8.** Employment authorization document issued by the Department of Homeland Security
		11. Clinic, doctor, or hospital record		
		12. Day-care or nursery school record		

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

University of Pennsylvania
Voluntary Self-Identification Form

The University of Pennsylvania (Penn) is an equal opportunity employer with a policy of non-discrimination. As a federal contractor, Penn must comply with federal regulations pertaining to affirmative action, equal opportunity, and non-discrimination. We ask your assistance in helping us to meet our federal compliance obligations of monitoring our hire, internal hire and transfer processes.

Completion of this form is strictly voluntary. Refusal to complete this form will not subject you to any adverse treatment. The information you provide on this form will be maintained confidentially.

Name _____ Sex: (M) (F)_____

Job Title _____ Org. No. 5600 Department No. 5600

The concept of race as used by the Federal government does not denote clear-cut scientific definitions of anthropological origins. A person may be included in the group to which s/he appears to belong, identifies with, or is regarded in the community belonging. The race/ethnicity categories below have been defined by the U.S. Office of Federal Contract Compliance.

1. Please identify your race/ethnicity by checking one of the categories listed below.

☐ **American Indian or Alaskan Native**
A person with origins in any of the original peoples of North America who maintains cultural identification through tribal affiliation or has community recognition as an American Indian or Alaskan Native.

☐ **Asian – Pacific Islander**
A person with origins in any of the original peoples of the Far East, Southeast Asia, the Indian subcontinent or the Pacific Islands. This area includes, for example, China, Japan, Korea, the Philippine Republic and Samoa; and, on the Indian Subcontinent, includes India, Pakistan, Bangladesh, Sri Lanka, Nepal, Sikkim and Bhutan.

☐ **Black** (or African American)
An individual, not of Hispanic origin, with origins in any of the black racial groups of Africa.

☐ **Hispanic** (or Latino)
A person of Mexican, Puerto Rican, Cuban, Central or South American, or other Spanish culture or origin, regardless of race. This does not include persons of Portuguese descent or persons from Central or South America who are not of Spanish origin or culture.

☐ **White**
An individual, not of Hispanic origin, with origins in any of the original peoples of Europe, North Africa. or the Middle East.

☐ **Decline to Identify**

2. Veteran status is Federally defined by the following categories. (Please check all that apply to you)

☐ **Vietnam Era Veteran**
A person who served on active duty for a period of more than 180 days, and was discharged or released with other than a dishonorable discharge, or was discharged or released from active duty for a service-connected disability if any part of such active duty occurred in the Republic of Vietnam between 02/28/1961 and 05/07/1975, or in all other cases between 05/05/1964 and 05/07/1975.

☐ **Recently Separated Veteran**
Any veteran during the one-year period beginning on the date of such veteran's discharge or release from active duty. (Effective December 1, 2003, recently separated veteran shall include any veteran during the three-year period beginning on the date of such veteran's discharge or release from active duty).

☐ **Other Eligible Veteran**
A person who, as a member of a reserve component under an order to active duty, served on active duty during a period of war or in a campaign or expedition for which a campaign badge is authorized and who was discharged or released from such duty with other than a dishonorable discharge.

Employee Signature: _____ Date: _____

BUSINESS ADMINISTRATOR USE ONLY
Personnel Payroll Codes:
R = Asian
C = Caucasian
A = Native American
B = African American
S = Hispanic
D = Decline to Identify

Upon entering the correct code into the Personnel Payroll System, please forward this form to Human Resources, Records Department