

Welcome to Emory's Supervisors Guide to the Employment Process.

The Employment *Guide* for Supervisors is provided to assist you in:

- working with your employment representative to fill open positions in your area,
- acclimating your new employee to your department and Emory University, and
- providing guidance to your new employee in the long term development of a successful career with Emory University.

The Guide and your employment representative will help you with the recruitment process, from submitting a *requisition* to orientating your new employee.

However, the employment process does not end when an applicant is hired, it is just the beginning. As a supervisor you are responsible for helping your new employee be successful. To assist you in this endeavor, this guide includes *checklists* of key orientation activities in the appropriate time sequence to help you ensure your new employee makes the transition to the job, to you as a supervisor, to co-workers, to the department and to Emory.

It is important to establish performance expectations early on as well as providing continual coaching and skill development for long term growth. Your on-going guidance is key to the success of your employee and we encourage you to take advantage of the many management tools available through Human Resources.

Additionally, forms mentioned or referenced within the Guide can be found on the Human Resources website at <http://emory.hr.emory.edu/forms.nsf> under Employment or Data Services Forms.

We hope that you find this guide helpful. If you should have any questions about the information contained in this guide, please contact your employment representative.

Employment Guide for Supervisors

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Document Overview

Purpose The purpose of this document is to assist you in working with your employment representative to fill open positions in your area.

Intended Audience The intended audiences for this document are supervisors with hiring capabilities.

Responsibility It is the responsibility of the supervisor to ensure that the hiring process yields a qualified and successful staff member. Each new staff member is to attend a new employee orientation program conducted by Human Resources, which will be scheduled by your employment recruiter.

Human Resources encourages you to conduct a department orientation to include:

➤	Description of the department's mission.
➤	Role of the position in achieving departmental goals.
➤	Description of department/division work rules or requirements.
➤	Training plan.
➤	Staff development resources.

After an open position is filled, you will receive a survey form requesting your evaluation of the recruitment/hiring process. Please take time to complete and return this form to your Human Resources department.

Section 1: Getting Started

Introduction

Before initiating the hiring process, your opening must be established in the Emory system. Compensation will assist the hiring official with necessary classification and salary administration information. Prior to beginning your search, please secure the appropriate development approval.

Information on how to access the forms discussed through out this guide can be located in the appendix section.

Posting A Position

New positions that are being posted should be submitted to the appropriate recruiting specialist in Employment via the Employment Requisition. New positions that are being filled through the administrative decision or search processes will be indicated on those respective forms.

Type	How to post
No current job classification	If a department is creating a new position for which Emory currently has no job classification, the department should submit a draft job description to its Compensation representative for review and classification in order to establish this opening.
Don't know how to classify	If a department wants to establish a position, but doesn't know how it should be classified, the department should contact its Compensation representative, who will assist in identifying an appropriate classification so the department can then proceed with filling the position.
Replacement position	If a position currently exists and has never been filled or has been filled but is now vacant, submit a completed Employment Requisition to Employment.

Completing an Employment Requisition

An Employment Requisition provides the employment representative with specific details describing the vacant position, including classification, work location/schedule, selection criteria and department contact/approval. Careful completion of the Employment Requisition is essential to a successful new hire. (For complete instructions, see Employment Requisition in the Appendix.)

Position Specific Information

Specific information such as job class code, title, grade, department, organization and schedule information is requested in the first section of the Employment Requisition.

Selection Criteria

Selection criteria provided by the hiring official are essential to identify the most competitively qualified candidates for the opening. Education and experience indicated must be equivalent to or greater than the minimum education and experience requirements for the classification. Therefore specific requirements should be mentioned to allow the most effective screening.

Section 1: Getting Started, continued

Submitting the Employment Requisition

The Employment Requisition may be sent through campus mail or faxed to the respective university or hospital Human Resource offices:

- Emory University: 404-727-1922
- Emory University Hospital: 404-686-7088
- Crawford Long Hospital: 404-686-4495

A requisition may also be submitted online to the employment office via the Hiring Manager Web Bench in the Personic system. Please contact your employment representative for details. (See sample Employment Requisition form in the Appendix and at <http://emory.hr.emory.edu> under Employment Forms and Brochures for Emory University and Hospitals.)

Recruiting and Advertising Positions

When an Employment Requisition is received, the employment representative will contact the hiring official to review the Employment Requisition, to estimate a time frame to fill the position, to determine recruitment strategies and interviewing methods, and to discuss location, working conditions, salary parameters, organizational relationships and special responsibilities related to the vacancy.

Open staff and faculty positions are advertised through the Job Opportunities Bulletin distributed weekly to selected locations campus wide and posted at each Human Resources location. The posting also can be found on the Internet each week at www.emory.edu. Emory places advertisements on websites, in local newspapers and selected national publications, including those directed to minorities and specific professions. Employment representatives work with departments to determine when, where and how advertisement should be placed. This combined effort avoids duplication of response information, provides consistency in advertising format and insures compliance with Affirmative Action guidelines.

Departments should contact the employment representative early in the process to discuss advertising needs and develop draft language for those positions categorized as "open recruitment" posting. Emory employment representatives work in concert with our contracted advertising agency, TMP Worldwide, to develop appropriate advertising to attract qualified candidates. All printed and website advertising is reviewed by both the hiring official and the employment representative for approval before it becomes available to the public. TMP Worldwide may also be contacted directly by the department for those positions categorized as a "search" posting. They may be reached by calling 770-551-9400 and asking to speak to the designated representative for the Emory account.

Sample formats for printed and website advertisements are available in Human Resources for review and discussion.

Candidates who contact a hiring official directly should be referred to Human Resources in order to proceed with the application process.

Section 2: Referring Applicants

Employment Interviews Prior to referral, the employment representative will screen/interview applicants, using position specific information obtained from the hiring official.

Applicant Referral Form The hiring official will receive an Applicant Referral form (ARF), which lists the applicant's name, position title, employment contact/telephone number, and Equal Employment Opportunity (EEO) hiring goals. Upon receipt of the referred applicants, the hiring official will begin the interview/selection process. (See sample Applicant Referral Form in the Appendix.)

Section 3: Interviewing

Interview Process Guidelines

Only job related questions should be asked. Information received during an interview should be used solely for the purpose of determining which applicant to hire and should be evaluated objectively and confidentially. Questions about the following topics should never be asked during an employment interview: age, child care, criminal record, disability, gender, health status, height and weight, marital status, race/color/ethnic background, religion, veteran/military status and sexual orientation.

Interview Preparation "The Basics"

Step	Process
1.	<p>Review Job Description:</p> <p>Review the current job description for the open position; provide the applicant with a copy. Be prepared to discuss the specifics of the open position (e.g., location, schedule, supervisor, primary duties, software packages used).</p>
2.	<p>Develop Questions:</p> <p>Develop specific interview questions to be asked of each candidate. (For examples, refer to "Interview Questions" section on page 9 of this guide.)</p>
3.	<p>Choose a Quiet Environment:</p> <p>Conduct the interview in a comfortable, private space, where there will be no interruptions.</p>
4.	<p>Establish Rapport and Dialogue:</p> <p>Establish an initial rapport with the candidate through "small talk." Maintain a conversational tone. Avoid a strictly question and answer format. Provide the candidate with general information about Emory and the hiring department.</p> <p>Encourage the applicant to ask questions to see how much he/she understands the position and the organization.</p>
5.	<p>Ask Questions:</p> <p>As much as possible, ask open-ended questions which encourage the candidate to share information.</p> <p>While closed-ended (yes/no, specific answer) questions have their place, they should be used sparingly.</p> <p>Don't be afraid to ask probing questions about the candidate's work history, schedule availability, salary requirements, etc.</p>
6.	<p>Take Notes:</p> <p>Take notes during the interview; organize/summarize them as soon as possible after the candidate has left. The originals of these notes should be given to the employment representative for retention in the official job file maintained by Human Resources.</p>

Section 3: Interviewing, continued

Interview Questions That Should Not Be Asked

Below are some general guidelines an interviewer should follow to avoid potential litigious situations and successful claims of illegal discrimination. These guidelines — which do not constitute an exhaustive list of sample questions — apply primarily to hiring, but can also be used in connection with transfers, reassignments and promotions. A general rule of thumb is to avoid any question that discusses areas of discrimination identified by the Equal Employment Opportunity Commission (e.g., race/color, ethnicity/national orientation, age, religion, sex, sexual orientation, disability, or military/reserve status) and only ask questions that are related to the position in question and job performance.

Race/Color

The interviewer **should not**:

1. Ask an applicant how he/she would feel about working with people of different races
 2. Ask if applicant would have a problem working for a supervisor of a different race
 3. Ask or comment on the applicant's complexion or skin color
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National Origin

The interviewer **should not**:

1. Ask if English is the applicant's second language
2. Ask, or comment on, an applicant's unusual name
3. Ask about, or comment on, an applicant's place of birth
4. Ask whether or not an applicant is a native-born or naturalized citizen

Note: The interviewer may ask an applicant whether or not he or she is legally eligible to work in the United States and whether or not he or she has the required documentation to prove eligibility status (must be furnished only at time of hire). Also the interviewer may ask what languages the applicant can read, write, and/or speak, or length of time at current residence.

Age

The interviewer **should not**:

1. Ask an applicant his/her date of birth or age
2. Make age-related comments like "at your age," or "you can't teach an old dog new tricks," etc.
3. Ask an applicant questions regarding pension, retirement, social security or Medicare benefits

Note: The interviewer may ask if applicant is at least 18 years of age, and if not, how old he or she is. May also ask to provide proof of age at time of hire.

Religion

The interviewer **should not**:

1. Ask or comment on an applicant's religious denomination or affiliation:
2. Do you attend church? If so, which church do you attend?
3. Can I get a reference from your pastor or someone at your church?
4. Ask an applicant what religious holidays he or she observes
5. Make religious-related comments (e.g. "This is a Christian company...")
6. Ask about the religious affiliation of a school attended by the applicant

Note: Title VII and some state laws impose a requirement on covered employers to accommodate the sincerely-held religious beliefs of employees.

Section 3: Interviewing, continued

Sex

The interviewer **should not**:

1. Ask questions regarding marital status:
2. What does your husband/wife do for a living?
3. What is your maiden name?
4. Why is your name hyphenated?
5. Ask an applicant questions regarding family:
6. The existence of children, how many or their age
7. Plans to have children
8. What would you do if your child were sick?
9. Questions regarding childcare issues (day care, babysitting, etc.)

Note: The interviewer may ask whether or not the applicant can meet the attendance requirements for the position, including overtime. An interviewer may also ask whether or not an applicant has ever worked for a company under a different name.

Disability

The interviewer **should not**:

1. Ask about, or comment, on whether or not an applicant has a disability
2. Ask an applicant questions regarding medical, psychiatric or substance abuse treatment history
3. Ask questions about workers' compensation history

Note: It is permissible to ask the applicant if he or she is able to perform the essential functions of the job with or without accommodations.

Military/ Reserve Status

The interviewer **should not**:

1. Ask questions about an applicant's current military status (e.g., "Will you require time off for military training?")
2. Ask questions about an applicant's discharge from the military (e.g., whether is was, dishonorable, medical, etc.)
3. Ask whether an applicant served in the military of another country

Note: The interviewer may ask an applicant if he or she has ever been a member of the U.S. armed services (but do not ask about dates of service). The interviewer may also ask about military experience if it relates to the job in question.

Section 3: Interviewing, continued

Sample Interview Questions

1. Why did you leave your last job?
 2. How many days of work have you missed in the past year?
 3. What licenses and certifications do you have?
 4. Explain briefly how the information you learned in school is related to this job?
 5. Describe the main responsibilities of your last/current position?
 6. Describe your current workday?
 7. What types of duties interest you the most?
 8. How would you describe the working relationship you had with your last supervisor?
 9. Were/are you entrusted with confidential information in your last/current job? If so, what kind?
 10. Describe a time when you made a mistake at work. How did you handle the situation?
 11. Have you taken any steps in the past year to improve your skills or performance?
 12. Have you ever disagreed with a policy/procedure? How did you handle this?
 13. Describe two examples of effective workplace decisions you have made in the last six months.
 14. Provide an example of a difficult workplace problem you have recently solved.
 15. Describe some typical decisions which you were required to make in your last position.
 16. How do you track progress on projects for which you are responsible?
 17. What did/do you enjoy most about your last/current job?
 18. What did/do you like least about your last/current job?
 19. How do you interact with difficult people?
 20. What attracted you to seek employment at Emory?
 21. Why should Emory consider hiring you?
 22. What are your short-term career goals? Long-term?
 23. What do you consider to be your professional strengths? Areas of development?
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Interviewing

An interview provides the hiring official with an opportunity to learn about an applicant's education and experience. In turn, the applicant is able to discover more about Emory and the open position.

Types of interviews include:

1. telephone screening
 2. face-to-face conversation
 3. a panel/committee approach
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Section 3: Interviewing, continued

Interview Stages

Interviews generally occur at two points in the hiring process:

Employment Interviews	An initial interview/applicant screening will be conducted by an employment representative, based on specific position related information provided by the hiring official.
Department Interviews	The hiring official begins interviewing upon receipt of the referral form. In most cases, the hiring official will have a face-to-face interview with each candidate, at an Emory location. Other persons in the department who have a work relationship to the position may also speak with the applicant, often as part of a panel.

Documentation

Documentation is an important part of the interview process. Details regarding the scheduling of the interviews, specific questions asked of each applicant, the applicant's response to questions and who conducted the interviews should be recorded. Such documentation will be maintained in a confidential location for three years by Human Resources.

Consultation

Upon completion of the interview, the hiring official will contact the employment representative to share interview remarks, collaborate on the selection of the final candidate, initiate the criminal history investigation and pre-employment drug screening, and to determine the final salary offer. No offer of employment may be made until these steps have been completed.

Testing

A hiring official may elect to use test results to assess the proficiency of applicants or final candidates. A variety of tests are at your disposal to evaluate skill sets for a range of positions. A listing of these available tests may be found by going to the "Prove-it" website at www.proveit.com under "Tests Available." Candidates may take tests from any location, online, or at the Human Resource Center. Tests can be administered by contacting your employment representative.

Section 4: Checking References

Introduction

Upon selection of the final candidate, the employment representative will verify current/previous employment. In some instances, the hiring official may choose to conduct the reference checks. In either case, the Employment and Degree Verification form should be used. It is important to remember that the objective of employment verification is to seek information about the applicant's previous job duties and his/her performance in that role, using the same guidelines as in an interview. (For complete instructions, see the Employment and Degree Verification in the Appendix.)

Internal Applicants

For internal applicants, the employment representative notifies the employee of his/her status as a final candidate. The hiring official is encouraged to speak directly to the employee's current Emory supervisor to obtain a reference.

External Applicants

For external applicants, current and/or previous employers will be questioned. If the applicant is employed, he/she should be informed prior to Emory's contacting the current employer. The employment representative will verify degrees/registrations/certifications.

Section 4: Checking References, continued

Consents

Consent Type	Process
Criminal Background	Applicants are required to sign a "Consent to Release Personal Records/History" form, authorizing Emory to obtain a criminal background history. All offers of employment for regular and temporary staff positions are contingent upon verification of information provided by the applicant. <i>Criminal background checks should be conducted prior to the new employee's start date.</i> Falsification of the criminal background check form or criminal background checks which identify convictions may cause withdrawal of the offer or may result in termination
Motor Vehicle Records	<i>For positions requiring operation of an Emory vehicle, information regarding an applicant's driving record will be obtained by Human Resources.</i> Applicants are required to sign a Motor Vehicles Records Consent form authorizing Emory to check their driving records, both personal and business.
Pre-employment Drug Screening	<p>The following criteria will be used to determine staff and principal hires subject to testing:</p> <ul style="list-style-type: none"> - Provides care to animals - Drives a university vehicle - Operates dangerous machinery/equipment and/or is exposed to chemicals or other hazardous materials - Provides patient/personal care - Provides security to campus community - Transfers (employees) into a job that requires drug testing <p>Drug testing will be coordinated by Human Resources and will be conducted by a certified forensic toxicology laboratory.</p> <p>The job offer will be automatically withdrawn in the event that the applicant refuses to submit to testing; the test reveals a confirmed positive result; or, in the opinion of Emory or the testing laboratory, the testing sample has been tampered with, substituted or altered in any way.</p> <p>A positive test result caused by the appropriate use of legally prescribed medications that are taken in accordance with the prescription and that do not cause unsafe or unacceptable job performance will not affect an applicant's employment.</p> <p>Applicants and/or employees who test positive or otherwise fail to satisfy the requirements of this policy may not reapply for Emory employment or a transfer for one year.</p>

Section 5: Extending A Job Offer

Hiring Goals	<p>In addition to the results of interviews and reference checks, hiring goals determined by Emory's Office of Equal Opportunity Programs (EOP) must be considered. Each hiring official is accountable for using good-faith efforts to achieve the goals established for the job group in which a vacancy has occurred. If a goal exists, the completed referral form along with the job description and copies of the applications/resumes of the referred applicants must be submitted to EOP for review and approval before a job offer is made. Critical to the review by EOP are the hiring official's reasons for selection/non-selection/non-interview. Questions concerning hiring goals should be directed to EOP (727-6016).</p> <p>If no goal exists, the hiring official forwards the completed referral form to the designated employment representative.</p>
Establishing Starting Salary	<p>The salary administration policy explains Emory's classification and pay system. (See Section VII, Part A, of the Emory Policies and Procedures Manual.)</p> <p>Starting salary offers for university positions are usually made by the hiring official or departmental HR representative, and are developed in collaboration with the employment representative, who evaluates the candidates experience and credentials, and reviews the departmental equity.</p> <p>No offer of employment should be made until the hiring official and the employment representative have finalized on this information.</p>
Making an Offer	<p>A job offer can be extended by the hiring official or the employment representative after EOP has given final approval (if a hiring goal exists). The job offer should be made orally, followed by a formal offer letter. (See sample Offer Letters in Appendix) A copy of the offer letter should be forwarded to Employment for inclusion in the personnel file.</p>
Offer Accepted by Applicant	<p>If the offer is accepted, a start date should be determined that coincides with the appropriate pay period (bi-weekly or monthly), if possible. Provide the new employee with a date and time to report to work. Explain to the new employee what can be expected on the first day (i.e. orientation, completion of new hire/tax forms, introduction to staff/general department procedures).</p>
New Hire Paperwork	<p>The new employee should be instructed to bring appropriate identification, as indicated on the I-9 Identification form, when reporting to work. The I-9 must be completed within three days of employment. This form, along with completed forms for State and Federal Taxes, Direct Deposit, Time and Attendance (for bi-weekly paid personnel) the HRAF, the ARF, and copies of the references should be returned to the employment representative for proper processing. (See sample I-9 form in Appendix A and http://emory.hr.emory.edu/forms.nsf under Employment Forms. The HRAF and ARF were discussed earlier in this document, while the W-4, G-4, Direct Deposit and Time and Attendance forms may also be retrieved on the same website and will be listed at the end of the Appendix). The hiring department should notify the employment representative of the start date. The employment representative will schedule the employee for orientation and confirm the date with the hiring official.</p>
Benefits Note	<p>Employees must enroll in benefit programs within 31 days of hire to avoid retroactive payments. Upon finalization of a hiring decision the employment representative will send a benefit booklet to the candidate, in advance of orientation, in order to give appropriate lead time to the new hire regarding benefit information that will be useful in his/her decision making. To aid the employment office in this process, please provide the earliest notification possible to the employment representative with regard to an offer of employment.</p>

Section 5: Extending A Job Offer, continued

Forms Used in Hiring Process

The following is a list of sample forms commonly used in the hiring process. A majority of these forms may be found in the Human Resource section of the Emory website at: <http://emory.hr.emory.edu/forms.nsf> under Employment or Data Services Forms, or by contacting the Human Resource Office.

Form	Where to find
Employment Requisition	Human Resources
Search Activity Report (SAR)	EOP
Administrative Decision Request	EOP and Human Resources
Application for Employment	Human Resources
Pre-employment Applicant Survey	Human Resources
Applicant Referral	Human Resources
Consent to: Personal Records/History Pre-employment Drug Screening Drug Testing Motor Vehicle Record Employment and Degree Verification	Human Resources
Offer Letter (samples)	Human Resources
Notice of Non-Selection	Human Resources
Reasons for Non-Selection	Human Resources
W-4 (Federal Tax Form)	Human Resources/Payroll
G-4 (State Tax Form)	Human Resources/Payroll
I-9 Identification Form	Human Resources
Direct Deposit Authorization	Human Resources
Time and Attendance	Human Resources
Human Resources Action (HRAF)	Human Resources

Section 5: Extending A Job Offer, continued

New Hire Checklist

Before the first day:

- __ 1. Ensure the new staff member has completed their employment application.
- __ 2. Mail offer letter to the new staff member to include the start date and time, salary, job title, date of and directions to the new hire orientation site, a request for the new employee to bring two forms of a picture id for completion of the I-9 form (please see list on form for acceptable documentation), the name of the departmental Human Resources Representative and Benefits Specialist and the Human Resources Web Site address for access to benefits information.
- __ 3. Confirm that you have an I-9, HRAF, W-4, G-4 forms from Human Resources and Payroll to complete within 3 days of hire of the new staff member. These forms are also available from the HR web site.
- __ 4. Make sure that adequate space, equipment and supplies, including business cards and a name plate (if appropriate) are available.
- __ 5. Develop a training plan (what tasks/skills need to be learned, who will teach them and when they will be taught). Identify milestones.
- __ 6. Plan the first day schedule (tour of the department, introduction to other department members, lunch with department members, locations of equipment, supplies and other resources, etc.).
- __ 7. Ensure that the appropriate people know when your new staff member is arriving.
- __ 8. Prepare forms to obtain employee access to necessary databases, e-mail, voice mail, etc.
- __ 9. Have the new staff member complete all necessary forms, such as the I-9 and tax forms and the personal section of the HRAF, and route to Human Resources at least 5 days prior to hire.

On the First Day:

- __ 1. Have the new staff member complete all necessary forms, such as the I-9 and tax forms and the personal section of the HRAF, if they have not already done so.
 - __ 2. Describe your department by explaining its name, purpose, position with the division and/or school, staff (e.g., organization chart), any special departmental rules or procedures, dress code, attendance policy, etc.
 - __ 3. Discuss your department's organizational mission and priorities.
 - __ 4. Discuss the new staff member's job duties and responsibilities using the job description. Emphasize maintaining confidentiality. Be sure to point out the importance of the job to the department and need to work as part of the department's "team". Provide the new employee with a written copy of your expectations of his/her performance of the job.
 - __ 5. Outline the unit organization and from whom the new employee will take direction, if other than or in addition to yourself.
 - __ 6. Explain the work schedule of the department and of the new employee (i.e., work hours, lunch times, breaks, overtime policy, procedure for notifying you in the event of absence, phone number to call for weather emergency status, etc.). If the employee is a biweekly paid employee, schedule Time and Attendance training with your department timekeeper.
 - __ 7. Review the Performance Management process and dates of review.
 - __ 8. Make sure the staff member knows the exact amount of her or her salary and when paydays occur.
 - __ 9. Review how and when vacation and sick leave are accrued and used, and how to request leave. Also provide the new employee with the department's leave request form. Review holiday schedule.
 - __ 10. Discuss work environment safety issues (e.g., what to do if injured on the job, fires escape routes, location of fire extinguishers, and in labs, the use of special equipment, toxic chemicals, hazardous waste, radiation, glass breakage, etc.)
 - __ 11. Discuss the security of the work area, both inside and outside the building.
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Section 5: Extending a Job Offer, continued

___ 12. Conduct a tour of the work area and make introductions to other department members and people outside of the department with whom the individual will work. Remember to identify rest rooms, staff lounges, eating areas, fire exits, etc.

___ 13. Complete paperwork to obtain access to databases, e-mail, voice mail, etc. has been completed. (Feeds to ITD from HR will generate an Emory email id. If you unit has a separate email system, please be sure to notify your IT department of the new hire.)

___ 14. Confirm the new employee's schedule date for New Hire Orientation and determine mode of transportation, i.e., university shuttle, personal car, etc.

___ 15. Schedule yourself or designate a "buddy" to take the new employee to lunch.

___ 16. Begin job training.

___ 17. At the end of the day, meet with the staff member to discuss the first day on the job. Ask questions, discuss concerns. Since new employees are sometimes reluctant to ask questions, you may need to encourage them.

First two weeks:

___ 1. On the second day, meet with the staff member. Has he or she thought of any questions or concerns? Is clarification needed?

___ 2. Discuss the importance of interacting courteously and effectively with other co-workers, students, patients, the public, etc.

___ 3. Actively manage the new employee's training. Consider utilizing the training and development programs available through Human Resources, if they apply to the new staff member's position.

___ 4. Encourage an eligible staff member to take advantage of the Tuition Reimbursement benefits and to enroll in courses that will prepare him or her to perform the job effectively and to maintain skills at a competitive level.

___ 5. Provide performance feedback to the staff member. Make your expectations clear. To correct problems early, offer training and constructive criticism. Give your new staff member positive reinforcement for tasks that have been performed well.

___ 6. Begin documenting the staff member's strengths and weaknesses to facilitate the performance management process and, if necessary, to take disciplinary action, up to and including termination.

___ 7. Ask for and discuss questions and concerns.

During the Sixth Month:

___ 1. Meet with the staff member to review performance to date and to ensure a clear understanding of your expectations and how well these are being met.

___ 2. Discuss training completed and training planned for the future.

During the Twelfth Month:

___ 1. Conduct the annual performance review. Discuss your staff member's strengths and weaknesses. A *Performance Management* form and *Guide* is available from Human Resources or you can print the form from the HR web site.

___ 2. Plan, with the employee, objectives for the coming year. Discuss training opportunities to complement the objectives.

___ 3. If the employee needs to improve any aspect of his/her performance, identify a development plan, review with the staff member and amend as necessary. A successful development plan requires support and follow through from both you and the staff member.

___ 4. Determine the amount of the staff member's salary increase according to your departmental budget. Any increase in excess of the university salary guidelines must be approved by the division/school Vice President or Dean prior to advising the staff member.

___ 5. Inform the staff member of the amount of the annual salary increase before it takes effect, and make every effort to ensure that the staff member will receive it in the paycheck on schedule.

___ 6. Prepare a letter recognizing the staff member's contributions and congratulating the individual on completing one year of employment with the university.

___ 7. Access the HR web site to adjust the salary online and to revise the review date to reflect the next year's review date.

Section 6: Notifying Non-Selected Applicants

Introduction	In most situations, the hiring official should contact non-selected candidates they have interviewed after the hiring decision has been made or if a position has been withdrawn. (See Sample Letters in that the hiring official may use).
Record Keeping	Documentation of the interview and selection process will be maintained in a confidential location for three years by Human Resources. Interview questions asked, interview notes, references obtained, and a copy of the Applicant Referral Form with appropriate, quantifiable reasons for selection and non-selection that meet EOP guidelines, are essential parts of this documentation. Reason codes for non-selection 1-8 may be found in the Applicant Referral Form instructions. (See additional guidelines for selection and non-selection.)

Section 7: Other Employment Options

Temporary Staffing

Emory Temporary Services (ETS) was established as an internal source for temporary help. ETS will offer departments quality temporary help for short-term assignments while also giving temporary employees an opportunity to showcase their skills and talents. Departments wanting to hire temporary staff for long-term assignments may contact their designated recruiter or ETS directly at 404-727-7590 or ETS@emory.edu. To learn more about ETS, go to the website <http://www.emory.edu/ets>.

Administrative Decision Procedures

All staff and faculty positions should be filled through Human Resources' open recruitment methods or through EOP's search procedures. The use of administrative decision is warranted only under these circumstances:

1. special emergency need;
2. changes in organizational structure and/or position requirements;
3. When a position requires special skills, training or education, and it can not be reasonably expected that a person with such unique qualifications could be employed through open recruitment or search
4. promotion of internal candidates.

Procedure:

1. Obtain an Administrative Decision Request for Approval from the Equal Opportunity Programs Office (See Administrative Decision Request Form in the Appendix).
2. Have the school/division affirmative action committee and/or the unit/division official review the decision carefully prior to forwarding the request to EOP.
3. Forward the request with the job description and resume of the proposed candidate to the EOP office.

Administrative Decisions require approval by EOP with regard to the process followed and candidate selected, and from Compensation as to the salary being offered. After its review, EOP will forward the request to Compensation for staff positions, and the appropriate vice president or provost for faculty positions. The final approving authority notifies the requesting official.

Section 7: Other Employment Options, continued

Search Procedures

Although open recruitment is the primary method for filling vacant positions, search committees are appointed to assist in the recruitment and selection of faculty and may occasionally be used for selected principal staff positions. In those situations, follow the procedures below.

Compose Search Committee (Disregard this step if no committee is used.)

1. Three or more persons
2. Representative of diverse Emory community

DEVELOP POSITION DESCRIPTION

1. For new staff positions only, contact Compensation to classify. For previously classified positions, call Compensation to confirm salary information.

DEVELOP VACANCY ANNOUNCEMENT/ ADVERTISEMENT

1. Consult Employment for assistance in creating/placing advertisements.
2. Include "Emory University is an EEO/AA employer."
3. Provide minimum and preferred qualifications which will be the basis of the hiring decision.
4. Include vacancy number on purchase order for advertisement.

OBTAIN VACANCY NUMBER

1. Discuss search procedures with an Equal Opportunity Programs staff member.
2. Deliver the position description (Compensation determines salary range for staff positions), vacancy announcement/advertisement and the Search Activity Report (SAR) with Step 1 completed to the Equal Opportunity Programs office before the search begins. (See Search Activity Report and at www.emory.edu/EEO/hiringpolicies.html for further instructions).
3. Obtain Search Guidelines Packet from the Equal Opportunity Programs office. The Search Guidelines Packet includes a Self-Identification Form (with vacancy information provided), and accompanying cover letters and envelopes which the department should send to all candidates who express interest in the position. In addition, the SAR once returned from EOP, contains affirmative action hiring goals which may exist for the position.

ACKNOWLEDGE APPLICANTS AND SEND SELF-IDENTIFICATION FORMS

1. Each applicant should receive a Self-Identification Form (copy original as necessary) and accompanying cover letter (copy as necessary) regardless of whether the individual meets the minimum qualifications.

REVIEW APPLICANT POOL

1. After closing date, review composition of applicant pool. Contact EOP for information regarding the composition of the applicant pool. Add these numbers to Step 3 of the SAR.
2. Initiate additional recruitment efforts if necessary. Contact women and minority caucuses within professional organizations; notify women and minority organizations; target advertising in publications with female/minority audiences; solicit applications from predominantly female/minority colleges/universities

REDUCE APPLICANT POOL TO "SHORT LIST"

1. On the basis of the predetermined position requirements and selection criteria, the initial pool of applicants may be reduced to a "short list."
2. Check references of candidates on "short list" and select 3 to 5 to interview.

Section 7: Other Employment Options

Search Procedures, continued

INTERVIEW FINAL CANDIDATES

1. Ask job-related questions
2. Keep interview process equitable for all candidates
3. Give interviewees a position description and general Emory information

PREPARE FOR PROPOSED HIRING DECISION

1. On the SAR, list and rank the final candidates, indicate the proposed selection decision(s) and provide detailed explanations as to why each unsuccessful candidate was not interviewed or selected.

IF A HIRING GOAL EXISTS, or if the position is non-faculty, return the SAR with resumes/ curriculum vitae of final candidates to the EOP office or EOP's designated representative prior to making an employment offer. (After review, EOP will forward these materials to Human Resources.)

IF NO HIRING GOAL EXISTS, the SAR must still be returned and reviewed by EOP prior to making an employment offer to complete documentation requirements. For faculty and staff positions, a copy of the completed SAR must be attached to the new hire paperwork forwarded to Human Resources.

NOTE: For all non-faculty positions, the SAR (including starting salary information) must be approved both by EOP and Human Resources administration prior to an offer.

MAKE EMPLOYMENT OFFER(S)

1. Once the proposed hiring decision is approved by EOP (and Human Resources for non-faculty jobs), notify candidates of their selection or non-selection.
2. Attach the completed SAR to the Human Resources Action Form (HRAF) to initiate addition/change of payroll status.
3. All materials considered in the selection process (including interview notes) should be maintained on file for three years.

Employee Referral Program

The Employee Referral Program was established to generate a flow of qualified candidates, better ensure excellent hires and enhance employee loyalty and morale. All regular full-time and part-time employees of Emory University, Emory University Hospital, Crawford Long Hospital, The Emory Clinic, Wesley Woods Center, and the Emory Children's Center may participate in the employee referral program. Referrals are made by the applicant indicating the referring employee's name on their employment application. If the applicant is hired and remains in a position of good standing for at least 90 days, the employee whose name was indicated on the application will be eligible to receive \$250 (before applicable taxes). There are certain position categories for hospital positions that offer \$500 or \$1000 (before applicable taxes) for successful referrals. For further details on the bonus, the entire program, and to obtain a referral form, please go to the website at <http://emory.hr.emory.edu/employment.nsf>.

Section 8: Equal Opportunity Statement

Equal Opportunity Statement

Emory does not discriminate in admissions, educational programs, or employment on the basis of race, color, religion, sex, sexual orientation, national origin, age, disability, or veteran/Reserve/National Guard status and prohibits such discrimination by its students, faculty and staff. Students, faculty and staff are assured of participation in programs and in use of facilities without such discrimination. Emory also complies with all applicable federal and Georgia statutes and regulations prohibiting unlawful discrimination. All members of the student body, faculty and staff are expected to assist in making this policy valid in fact. Any inquiries regarding this policy should be directed to the Emory Office of Equal Opportunity Programs, 110 Administration Building, Atlanta, GA 30322. Telephone 404-727-6016.

Section 9: Conditions of Employment

Policies and Procedure for Corrective Discipline

There are times when corrective discipline is in order to improve the attendance, behavior or productivity of an employee. There are also instances when gross misconduct may occur, requiring immediate disciplinary action and possible termination. It is important that departments understand the processes and procedures to be followed in either case, or who to contact for assistance in these matters. The following are some basic steps to follow.

Human Resources consultation is recommended prior to any disciplinary action involving suspension without pay or termination to verify appropriate documentation consistent with Emory's policies and procedures.

All communications with employees regarding disciplinary matters should clearly identify the issues of concern and should be clear and positive. Discipline should be timely, consistent and not administered in haste or anger.

The following should be done prior to disciplinary action:

1. Identify and record the facts.
2. Consider the overall history of performance, attendance, and/or conduct in the job and length of service.
3. Consider the nature, severity and effects of the unacceptable conduct or job performance or attendance issues.
4. Review and consider previous disciplinary action(s).
5. Determine appropriate action based on available information.

Any discussion with an employee concerning discipline should be conducted in a place and manner that respects the privacy of the employee. If in doubt as to appropriate actions regarding a matter of concern, please contact the Employee Relations Office. Also, for further information, refer to the website at <http://emory.hr.emory.edu/policies.nsf>

Section 10: Human Resources Information

**Contact
Information**

Entity	Address	Phone / Fax
Emory University	Human Resources 1762 Clifton Road Atlanta, GA 30322	404.727.7611 404.727.1922 fax
Emory University Hospital	Human Resources Room D201, 1364 Clifton Road Atlanta, GA 30322	404.686.7100 404.686.7088 fax
Crawford Long Hospital	Human Resources 550 Peachtree Street Atlanta, GA 30365	404.686.7100 404.686.4495 fax

(Emory Job Opportunities Online) www.emory.edu

Appendix

- Human Resources Action Form (HRAF)
- Employment Requisition Form
- Applicant Referral Form
- Offer Letter
- I-9/Employment Eligibility Verification Form
- Notice of Non-selection (3 sample letters)
- Search Activity Report
- Pre-Employment Survey
- Employee Transfer Form
- Application for Employment
- Pre-Employment Drug Screening Consent Form (Note: Only to be used for those positions that require drug testing.)
- Consent to Personal Records/History Release
- Driving Consent Form
- Employment and Degree Verification Form
- W-4 (Federal Tax Form)
- G-4 (State Tax Form)
- Direct Deposit Authorization Form
- Time and Attendance

Reminder: For the most current version of these forms, please go to the Human Resources Website at <http://emory.hr.emory.edu/forms.nsf> and search under Employment.

HUMAN RESOURCES ACTION FORM CODES

PERSONAL INFORMATION

Marital Status

D Divorced
M Married
E Separated
S Single
U Unknown
W Widowed

Highest Education Level, cont.

DD/DMN - divinity/ministry
MD - medical doctor
MD/MPH
Tech/trade school certificate
Business school work
Business school certificate
Nursing diploma
Associate's degree
Teaching certificate
Master's program work
Doctoral program work
PhD
LLD/JD
DVM - veterinary science
MD/PhD combined
Post-doct work

Highest Education Level, cont.

SCD doctorate
DDS/DMD - dentistry
DD - optometry
DO - osteopathy
DPM/DF/POD.D - podiatry
Other
Physician assistant
CRNA
Nurse practitioner

Ethnic Group

Am. Indian
Asian
Black
Hispanic
White

Emergency Contact Relationship

Daughter
Ex-spouse
Other
Son
Spouse

Highest Education Level

Not indicated
Less than HS
HS grad or equiv
Two to four years college
Educational specialist
Bachelor's level degree
EDD doctorate
Master's level degree

Military Status

1 Not indicated
2 No military service
3 Vietnam era veteran
4 Other veteran
5 Active reserve
6 Inactive reserve
7 Retired
8 Inactive reserve subject to call up
9 National Guard

JOB INFORMATION

Action Codes

DEM Demotion
DTA Data change
HIR Hire
JED Earnings distribution change
LOA Leave of absence - unpaid
PAY Pay rate change
PLA Paid leave of absence
POS Position change
PRO Promotion
REH Rehire
RET Retirement
RFL Return from leave
TER Termination
XFR Transfer

Reason Codes

Demotion
IVA Demotion involuntary-admin/org decision
VAD Demotion, admin/org decision
VOL Demotion voluntary
Data Change
CDP Correction - department
CJC Correction - job code
CPR Correction - pay rate
CRD Change review data
CRG Change to regular status
STC Status change
Hire
ADM Administrative decision
HAF Hired from affiliate
HRE New hire
TMP Temporary assignment
Job Earnings Distribution
CID Change in distribution
Leave of Absence - Unpaid
ADM Administrative
DSJ Disability - job related
DSN Disability - non job related
EDU Education
FML Family and Medical Leave Act
MIL Military service
PER Personal
PRO Professional

Leave of Absence - Unpaid, cont.

PRS Prestigious
SEA Seasonal
Pay Rate Change
ADJ Adjustment
AMW Adjustment to minimum wage
MER Merit
MKT Market adjustment
OCP Out of class pay
REC Job reclassification
SSC Salary schedule change
Paid Leave of Absence
ADM Administrative
DSJ Disability - job related
DSN Disability - non job related
EDU Education
FMA Family and Medical Leave Act
MIL Military service
PER Personal
PRO Professional

Rehire

REH Rehire
RET Rehire retiree
XFR Organizational transfer

Retirement

RET Retirement
Return from Leave
RFL Return from leave

Termination

ABS Absences or tardiness
CON Misconduct
DEA Death
FAL Falsification of records
FAM Family/personal reasons
HRS Dissatisfaction w/hours
INS Insubordination
JOB Job abandonment
LOC Dissatisfaction w/location/transport
LVE Failure to return from leave
MCJ Multiple concurrent job end
OTP Resignation - other position
PAY Dissatisfaction w/pay
PER Personal reasons
RDE Reduction in force
RDF Reduction in force - lack of funding
REF Refused transfer
REL Relocation
TMP End temporary employment
TYP Dissatisfied w/type of work

Termination, cont.

UNS Unsatisfactory performance
WOR Dissatisfied w/work conditions
WPE Work permit expired
XFR Organizational transfer
Transfer
EER Employee request
LAD Lateral transfer adm/dec
LXF Lateral transfer
ROR Reorganization

Employee Class

0 Faculty at Instructor, Associate, Lecturer, Special Lecturer, Senior Lecturer, Senior Associate
1 Faculty above the rank of Instructor, Associate, Lecturer, Special Lecturer, Senior Lecturer
2 Academic Dean
3 Faculty equivalent
4 Librarian
5 Principal, board approved
6 Principal, presidential approved
7 Staff
8 Student
9 Post-doctoral fellow - non-degree seeking (1355)
A Adjunct faculty
B Medical house staff
F Grandfathered post-doctoral fellow
G Post-doctoral fellow NRSA (7225)
H WOC
L Traineeships, non-taxable stipends (7210)
W Work study student

Pay Group

EUB Emory University biweekly
EUM Emory University monthly
FMD Facilities Management Division
NHM (Only used with company NIH)
NRC Non-resident alien contractors
UB7 Biweekly NRA income code 17
UB8 Biweekly NRA income code 18
UB9 Biweekly NRA income code 19
UM7 Monthly NRA income code 17
UMB Monthly NRA income code 18

Pay Group, cont.

UM9 Monthly NRA income code 19
WOC Volunteers - no compensation

Employee Type

H Hourly
S Salaried

Earnings Codes

N15 NRA - scholarship/fellowship
N16 NRA - independent personal svc

Earnings Codes, cont.

N17 NRA - dependent personal service
N18 NRA - teaching
N19 NRA - studying & training
N50 NRA - other income
REG Regular pay
RET Retroactive pay
Z00 Subaccount 7210 only
Z42 1042 reportable
Z99 Subaccount 7225 only

Earnings Codes Assigned by Tax Office

Codes that end in a 7, 8 or 9

Holiday

EUVH For regular biweekly 0.5 FTE only

EMPLOYMENT INFORMATION

BAS Group ID

EUV Emory University
RTP Residency Training Program

Faculty Rank

10 Professor
15 Associate Professor
20 Assistant Professor
25 Instructor
30 Senior Associate
35 Associate
40 Senior Lecturer
45 Lecturer
50 Administrative Professor
55 Teaching Affiliate
60 Other

Track

A Adjunct
C Clinical
L Lecturer
O Other
P Professor Emeritus
R Research
T Tenure
VA Volunteer - Adjunct
VC Volunteer - Clinical
VO Volunteer - Other

Benefits Eligibility

REG Reg, FT or PT
FT6MO FT temp 6mo assignment
FTTEMP FT temp < 6mo assignment
PTTEMP PT temp
REH RETIRE Rehired retiree
RTLFT Reg, time-limited, full-time
RTLPT Reg, time-limited, part-time

EMORY EMPLOYMENT REQUISITION

SEE REVERSE SIDE FOR INSTRUCTIONS

Job Class Code:	Job Title:
-----------------	------------

Department ID Number:	Department Name:	Position Status: ___ New ___ Replacement
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Organization: EU EUH CLH
Work Location Address: _____

Comments: Describe the specific skills — **beyond minimum qualifications** — that are preferred for this position such as education, experience, software applications and certifications desired. (Use separate sheet of paper, if necessary.)

Usual Work Schedule: Mon-Fri Some Wknds All/Most Wknds Other Usual Work Shift: Days Evenings Nights Primary Shift Schedule (include hours): _____	Hours Per Week: FTE:	Salary Grade:
	Status: Reg FT Reg PT Temp FT Temp PT PRN If temporary, list dates of employment _____	

Previous Incumbent _____	SSN _____
Is incumbent separating? Yes ___ No ___	If "Yes," date separating _____
Exit Interview scheduled? Yes ___ No ___ Please process Human Resources Action Form (HRAF) for previous incumbent.	

Required Information:

1) This individual will perform tasks using research lab animals. <input type="checkbox"/> Yes <input type="checkbox"/> No 2) The individual will work with ultratoxic chemicals, designated or suspect mutagenic or teratogenic chemical agents. <input type="checkbox"/> Yes <input type="checkbox"/> No 3) The individual will work with radioactive materials or machine produced radiation. <input type="checkbox"/> Yes <input type="checkbox"/> No	4) The individual will work with human blood, body fluids, unfixed tissues or organs from human or HIV-containing cell or tissue cultures, organ cultures, or HIV or HBV-containing culture media or other solutions, other blood, organs or other tissues from experimental animals infected with HIV or HBV. <input type="checkbox"/> Yes <input type="checkbox"/> No 5) The individual will work and interact with patients and/or their families. <input type="checkbox"/> Yes <input type="checkbox"/> No
---	---

Testing/Supervisory/Lead (all clerical applicants will be tested):

Is any testing required?	Yes	No	Previous experience preferred?	
Is any supervisory experience required?	Yes	No	___ Emory University	___ Other college or university
Is any lead experience required?	Yes	No	___ Emory University Hospital	___ Other hospital/health care org.
			___ Crawford Long Hospital	___ Non-profit
			___ Emory Clinic	

Hiring Official:

Name/Signature _____	Title _____	Date _____	Phone _____
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Department Contact:

Print Name _____	Signature _____	Title _____	Phone _____
Address _____	Date _____	E-mail Address _____	Fax No. _____

Department/Administrative Approval:

Print Name _____	Signature _____	Title _____	Phone _____
Address _____	Date _____	E-mail Address _____	Fax No. _____

HUMAN RESOURCES USE ONLY

Date Received by Spec. _____	Recruiter Code _____	Job Posting (Req. #) _____	Salary Range _____	Date Activated _____	Date Filled _____
Selected Applicant's Name _____			Social Security Number _____	Orientation Date _____	
Start Date _____	Salary _____	EEO Job Group _____	EEO Category _____		

EMPLOYMENT REQUISITION INSTRUCTIONS

The Employment Requisition is submitted to begin the open recruitment process to fill a vacant position. If you need assistance in completing this form, please contact your employment representative. Complete the form as follows:

- The sections **Job Class Code** through **Status** are to be completed with specific position-related information. **Department ID Number** refers to the department number in the University; the cost center in the Hospitals.
- Use the **Comments** section for additional position related information that may be relevant to the recruitment process. For example: preferred qualifications (beyond minimum qualifications), frequent off-site visits requiring use of personal vehicle, additional hours may be required during peak periods, will work in inclement weather conditions, no smoking. Include testing requirements and software applications here.
- Exit interviews should be scheduled with the Human Resources department for all terminating employees.
- Complete the **Testing/Supervisory/Lead** experience required questions. Include the names of the tests required in the comments section. Available tests include data entry, Excel, Lotus, letter form, speed typing, statistical typing, ten key speed typing, Windows, Word and WordPerfect.
- In most instances, the **Hiring Official** is the individual for whom the position is being recruited and to whom the position will report. The **Department Contact** is the department representative who will be working with the employment representative throughout the recruiting process. They may be the same. Department approval refers to the administrative individual authorizing the position to be filled.
- Send the completed Employment Requisition to your organization's Human Resources office. You may include a detailed position description to assist in the recruitment process.

Street addresses for Emory University, Emory University Hospital and Crawford Long Hospital:

Emory University
Human Resources
Employment Department
1762 Clifton Road, 2nd Floor
Atlanta, GA 30322
Telephone: 404-727-7611
Fax: 404-727-7108

Emory University Hospital
Human Resources
Employment Department
1364 Clifton Road, Rm. D201
Atlanta, GA 30322
Telephone: 404-686-7100
Fax: 404-686-7088

Crawford Long Hospital
Human Resources
Employment Department
550 Peachtree Street
Atlanta, GA 30365
Telephone: 404-686-7100
Fax: 404-686-4495

JOB POSTING NUMBER:

POSITION TITLE:

Applicant Referral

HIRING OFFICIAL & TITLE:

DEPARTMENT:

Form

CAMPUS ADDRESS & PHONE:

REFERRAL DATE:

Emory University

EMPLOYMENT SPECIALIST, HR

SPECIALIST PHONE:

Human Resources Division

This form must be completed, signed and returned to the appropriate office before the hire can be processed.

HIRING GOAL

Minority __ Female __ None __

UNDERUTILIZED

Black __ Hispanic __ Asian __

IMPORTANT: For approval of the proposed employment offer, if a hiring goal is indicated, return this form with the position Questionnaire and applications to the Office of Equal Opportunity Programs, Administration Building. If no hiring goal exists, Return to the Employment Department, Human Resources Division.

Name of Applicant & Social Security Number	Race Sex	Transfer Y/N	Interview Date	Proposed Start Date	Selection Code	Reasons for Selection/Nonselection or Non Interview

Hiring Official Signature _____ Title _____ Phone Number _____ Date _____

EOP Approval _____

APPLICANT REFERRAL FORM

Emory is committed to a positive and continuing affirmative action program. The major objective is to ensure that all open positions are filled by the most qualified applicant, as determined by the Emory hiring authority.

In order to assist the employment process and affirmative action program, please furnish the information requested for each applicant.

This form is used for all staff vacancies filled through referral from Human Resources. This form must be completed prior to employment. If a hiring goal exists, this form must be completed and approved by the Equal Opportunity Programs Office before an offer can be made.

If a hiring goal is indicated, return this form with the job description and applications to the Office of Equal Opportunity Programs, 110 Administration Building for approval of the proposed employment offer. If no hiring goal exists, return the form to your assigned employment representative.

It is mandatory for the responsible hiring official to keep on file and accessible for three (3) years from the date of hire all interview notes and further documentation regarding each hiring decision.

INSTRUCTIONS

(Please type or print firmly with ballpoint pen.)

Race/Ethnic Designations

1. WHITE (not of Hispanic origin): Persons having origins in any of the original peoples of Europe, North Africa or the Middle East.
2. BLACK (not of Hispanic origin): Persons having origins in any of the black racial groups of Africa.
3. HISPANIC: Persons of Mexican, Puerto Rican, Cuban, Central or South American, or other Spanish culture or origin, regardless of race.
4. ASIAN or PACIFIC ISLANDER: Persons having 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 Islands and Samoa.
5. AMERICAN INDIAN or ALASKAN NATIVE: Persons having origins in any of the original peoples of North America and who maintain cultural identification through tribal affiliation or community recognition.

Interview Date: List date of actual interview(s).

Proposed Start Date: Indicate the proposed start date of the person you wish to hire. Note: If a hiring goal exists, an employment offer may not be made prior to receiving approval of the Office of Equal Opportunity Programs.

Reason Not Interviewed/Selected: If the applicant was not interviewed/selected, indicate the specific reason(s) in the space provided, using both the code and a detailed explanation as listed below. If no code fits your situation, choose number 8, OTHER, and explain in detail.

Code Reason

1. Candidate did not show for interview. Indicate the date for which the interview was scheduled.
2. Unable to contact candidate. Indicate dates attempted contact was made and by what means.
3. Unfavorable references. Explain.
4. Rejected salary offer. Explain.
5. Candidate declined offer of employment. Indicate date the offer is made. Explain.
6. Candidate withdrew from consideration. Explain.
7. Candidate lacked specific qualification. Explain.
8. Other reason(s). Explain.

If you have questions about recruiting/referral procedures, please call your employment representative (727-7611). Questions concerning hiring goals should be directed to the Office of Equal Opportunity Programs (727-6016). Detailed information regarding the employment process is included in the Supervisor's Guide to Employment.

**EMORY UNIVERSITY OFFER
SAMPLE LETTER**

January 2, 2001

Dear Mr.\Ms. «LastName»:

I am delighted to offer you a position at Emory University as a _____ (TITLE) _____ in the _____ (DEPARTMENT) _____, to start on _____ (DATE) _____ at a salary of \$_____ per year/hour. As we discussed, this is an exempt, monthly paid position that requires direct deposit to your bank account. Pay day is the last working day of the month. (Alternative: As we discussed, this is a non-exempt, hourly paid position. You will be paid every other Friday.)

Please report to Room 100 of the Human Resources Building located at 1762 Clifton Road for orientation on _____ (DATE) _____ at 8:30 a.m. Timely attendance at orientation is important. During this orientation session, you will be introduced to the University, receive an explanation of benefits, and enroll in selected benefits. Failure to enroll promptly will require that you wait until the next open enrollment period to sign up for benefits. Your designated benefits representative is _____.

Please contact me at (404) 727-_____ if you have any questions or need additional information. I hope this position will be a rewarding experience for you, both personally and professionally.

Sincerely,

«RecruiterLongName»
Human Resources Associate, Senior

Employment Eligibility Verification

INSTRUCTIONS

PLEASE READ ALL INSTRUCTIONS CAREFULLY BEFORE COMPLETING THIS FORM.

Anti-Discrimination Notice. It is illegal to discriminate against any individual (other than an alien not authorized to work in the U.S.) in hiring, discharging, or recruiting or referring for a fee because of that individual's national origin or citizenship status. It is illegal to discriminate against work eligible individuals. Employers **CANNOT** specify which document(s) they will accept from an employee. The refusal to hire an individual because of a future expiration date may also constitute illegal discrimination.

Section 1 - Employee. All employees, citizens and noncitizens, hired after November 6, 1986, must complete Section 1 of this form at the time of hire, which is the actual beginning of employment. **The employer is responsible for ensuring that Section 1 is timely and properly completed.**

Preparer/Translator Certification. The Preparer/Translator Certification must be completed if Section 1 is prepared by a person other than the employee. A preparer/translator may be used only when the employee is unable to complete Section 1 on his/her own. However, the employee must still sign Section 1.

Section 2 - Employer. For the purpose of completing this form, the term "employer" includes those recruiters and referrers for a fee who are agricultural associations, agricultural employers or farm labor contractors.

Employers must complete Section 2 by examining evidence of identity and employment eligibility within three (3) business days of the date employment begins. If employees are authorized to work, but are unable to present the required document(s) within three business days, they must present a receipt for the application of the document(s) within three business days and the actual document(s) within ninety (90) days. However, if employers hire individuals for a duration of less than three business days, Section 2 must be completed at the time employment begins. **Employers must record: 1) document title; 2) issuing authority; 3) document number, 4) expiration date, if any; and 5) the date employment begins.** Employers must sign and date the certification. Employees must present original documents. Employers may, but are not required to, photocopy the document(s) presented. These photocopies may only be used for the verification process and must be retained with the I-9. **However, employers are still responsible for completing the I-9.**

Section 3 - Updating and Reverification. Employers must complete Section 3 when updating and/or reverifying the I-9. Employers must reverify employment eligibility of their employees on or before the expiration date recorded in Section 1. Employers **CANNOT** specify which document(s) they will accept from an employee.

- If an employee's name has changed at the time this form is being updated/ reverified, complete Block A.
- If an employee is rehired within three (3) years of the date this form was originally completed and the employee is still eligible to be employed on the same basis as previously indicated on this form (updating), complete Block B and the signature block.

- If an employee is rehired within three (3) years of the date this form was originally completed and the employee's work authorization has expired or if a current employee's work authorization is about to expire (reverification), complete Block B and:
 - examine any document that reflects that the employee is authorized to work in the U.S. (see List A or C),
 - record the document title, document number and expiration date (if any) in Block C, and
 - complete the signature block.

Photocopying and Retaining Form I-9. A blank I-9 may be reproduced, provided both sides are copied. The Instructions must be available to all employees completing this form. Employers must retain completed I-9s for three (3) years after the date of hire or one (1) year after the date employment ends, whichever is later.

For more detailed information, you may refer to the INS Handbook for Employers, (Form M-274). You may obtain the handbook at your local INS office.

Privacy Act Notice. The authority for collecting this information is the Immigration Reform and Control Act of 1986, Pub. L. 99-603 (8 USC 1324a).

This information is for employers to verify the eligibility of individuals for employment to preclude the unlawful hiring, or recruiting or referring for a fee, of aliens who are not authorized to work in the United States.

This information will be used by employers as a record of their basis for determining eligibility of an employee to work in the United States. The form will be kept by the employer and made available for inspection by officials of the U.S. Immigration and Naturalization Service, the Department of Labor and the Office of Special Counsel for Immigration Related Unfair Employment Practices.

Submission of the information required in this form is voluntary. However, an individual may not begin employment unless this form is completed, since employers are subject to civil or criminal penalties if they do not comply with the Immigration Reform and Control Act of 1986.

Reporting Burden. We try to create forms and instructions that are accurate, can be easily understood and which impose the least possible burden on you to provide us with information. Often this is difficult because some immigration laws are very complex. Accordingly, the reporting burden for this collection of information is computed as follows: **1) learning about this form, 5 minutes; 2) completing the form, 5 minutes; and 3) assembling and filing (recordkeeping) the form, 5 minutes,** for an average of 15 minutes per response. If you have comments regarding the accuracy of this burden estimate, or suggestions for making this form simpler, you can write to the Immigration and Naturalization Service, HQPDI, 425 I Street, N.W., Room 4034, Washington, DC 20536. OMB No. 1115-0136.

Employment Eligibility Verification

Please read instructions carefully before completing this form. The instructions must be available during completion of this form. **ANTI-DISCRIMINATION NOTICE:** It is illegal to discriminate against work eligible individuals. Employers **CANNOT** specify which document(s) they will accept from an employee. The refusal to hire an individual because of a future expiration date may also constitute illegal discrimination.

Section 1. Employee Information and Verification. To be completed and signed by employee at the time employment begins.

Print Name: Last	First	Middle Initial	Maiden Name
Address (Street Name and Number)		Apt. #	Date of Birth (month/day/year)
City	State	Zip Code	Social Security #
I am aware that federal law provides for imprisonment and/or fines for false statements or use of false documents in connection with the completion of this form.		I attest, under penalty of perjury, that I am (check one of the following): <input type="checkbox"/> A citizen or national of the United States <input type="checkbox"/> A Lawful Permanent Resident (Alien # A _____) <input type="checkbox"/> An alien authorized to work until ___/___/___ (Alien # or Admission #) _____	
		Employee's Signature	

Preparer and/or Translator Certification. (To be completed and signed if Section 1 is prepared by a person other than the employee.) I attest, under penalty of perjury, that I have assisted in the completion of this form and that to the best of my knowledge the information is true and correct.

Preparer's/Translator's Signature	Print Name
Address (Street Name and Number, City, State, Zip Code)	
Date (month/day/year)	

Section 2. Employer Review and Verification. To be completed and signed by employer. Examine one document from List A OR examine one document from List B and one from List C, as listed on the reverse of this form, and record the title, number and expiration date, if any, of the document(s)

List A	OR	List B	AND	List C
Document title: _____		_____		_____
Issuing authority: _____		_____		_____
Document #: _____		_____		_____
Expiration Date (if any): ___/___/___		___/___/___		___/___/___
Document #: _____		_____		_____
Expiration Date (if any): ___/___/___		_____		_____

CERTIFICATION - I attest, under penalty of perjury, that I have examined the document(s) presented by the above-named employee, that the above-listed document(s) appear to be genuine and to relate to the employee named, that the employee began employment on (month/day/year) ___/___/___ and that to the best of my knowledge the employee is eligible to work in the United States. (State employment agencies may omit the date the employee began employment.)

Signature of Employer or Authorized Representative	Print Name	Title
Business or Organization Name		Date (month/day/year)
Address (Street Name and Number, City, State, Zip Code)		

Section 3. Updating and Reverification. To be completed and signed by employer.

A. New Name (if applicable)	B. Date of rehire (month/day/year) (if applicable)
C. If employee's previous grant of work authorization has expired, provide the information below for the document that establishes current employment eligibility.	
Document Title: _____	Document #: _____
Expiration Date (if any): ___/___/___	

I attest, under penalty of perjury, that to the best of my knowledge, this employee is eligible to work in the United States, and if the employee presented document(s), the document(s) I have examined appear to be genuine and to relate to the individual.

Signature of Employer or Authorized Representative	Date (month/day/year)
--	-----------------------

LISTS OF ACCEPTABLE DOCUMENTS

LIST A	LIST B	LIST C
Documents that Establish Both Identity and Employment Eligibility	Documents that Establish Identity	Documents that Establish Employment Eligibility
<ol style="list-style-type: none"> 1. U.S. Passport (unexpired or expired) 2. Certificate of U.S. Citizenship (<i>INS Form N-560 or N-561</i>) 3. Certificate of Naturalization (<i>INS Form N-550 or N-570</i>) 4. Unexpired foreign passport, with <i>I-551</i> stamp or attached <i>INS Form I-94</i> indicating unexpired employment authorization 5. Alien Registration Receipt Card with photograph (<i>INS Form I-151 or I-551</i>) 6. Unexpired Temporary Card (<i>INS Form I-688</i>) 7. Unexpired Employment Authorization Card (<i>INS Form I-688A</i>) 8. Unexpired Reentry Permit (<i>INS Form I-327</i>) 9. Unexpired Refugee Travel Document (<i>INS Form I-571</i>) 10. Unexpired Employment Authorization Document issued by the INS which contains a photograph (<i>INS Form I-688B</i>) 	<p>OR</p> <ol style="list-style-type: none"> 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, sex, height, eye color and address 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, sex, height, eye color and address 3. School ID card with a photograph 4. Voter's registration card 5. U.S. Military card or draft record 6. Military dependent's ID card 7. U.S. Coast Guard Merchant Mariner Card 8. Native American tribal document 9. Driver's license issued by a Canadian government authority <p style="text-align: center;">For persons under age 18 who are unable to present a document listed above:</p> <ol style="list-style-type: none"> 10. School record or report card 11. Clinic, doctor or hospital record 12. Day-care or nursery school record 	<p style="text-align: center;">AND</p> <ol style="list-style-type: none"> 1. U.S. social security card issued by the Social Security Administration (<i>other than a card stating it is not valid for employment</i>) 2. Certification of Birth Abroad issued by the Department of State (<i>Form FS-545 or Form DS-1350</i>) 3. Original or certified copy of a birth certificate issued by a state, county, municipal authority or outlying possession of the United States bearing an official seal 4. Native American tribal document 5. U.S. Citizen ID Card (<i>INS Form I-197</i>) 6. ID Card for use of Resident Citizen in the United States (<i>INS Form I-179</i>) 7. Unexpired employment authorization document issued by the INS (<i>other than those listed under List A</i>)

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

June 5, 2003

"FirstName" "LastName"
"HomeStreet"
"HomeCity", "HomeState" "HomeZip"

Dear "FirstName",

We have received your recent inquiry concerning employment with Emory University and appreciate your interest in Emory.

We have reviewed your experience and education against our current requirements. Although your qualifications are impressive, we feel that our current opening does not offer a close match to your background.

As you might imagine, our operations and employment requirements are continually expanding and changing. We have placed your resume in our future reference file where it will be reviewed again as openings in your area of interest become available.

We sincerely appreciate your interest in Emory University. We regret that this response cannot be more favorable, and we wish you well in locating the opportunity you desire.

Thank you for considering Emory University as a potential employer.

Sincerely,

June 5, 2003

"FirstName" "LastName"

"HomeStreet"

"HomeCity", "HomeState" "HomeZip"

Dear "FirstName",

Thanks for your interest in the position of "Title" position in the "Department" department. Many highly qualified applicants were considered. While your background and skills were impressive, an individual whose credentials and experience more closely matched the requirements of the position has been selected.

Your information will remain in our database for six months from the date of completion. You will be contacted if another position commensurate with your qualifications and experience becomes available.

We thank you and wish you the best in your professional endeavors.

Sincerely,

June 5, 2003

"FirstName" "LastName"

"HomeStreet"

"HomeCity", "HomeState" "HomeZip"

Dear "LastName",

I regret to inform you that the "Title" position in the "Department" has been withdrawn and will not be filled at this time.

Your information will remain in our database for six months from the date of completion. You will be contacted if another position commensurate with your qualifications and experience becomes available.

We thank you for your interest in employment with Emory and wish you the best in your professional endeavors.

Sincerely,

VACANCY #

AUTO-EXPIRATION DATE



EMORY
EQUAL OPPORTUNITY PROGRAMS

HIRING GOAL: Minority |
Female

SEARCH ACTIVITY REPORT (SAR)

Use this form for all faculty and staff positions filled through search procedures rather than through referral by the Employment Department, Human Resources Division. **At the beginning of the search for staff positions, contact Compensation to determine the hiring range for the job.** To avoid processing delays, please provide all requested information. Please print or type.

STEP 1: BEFORE SEARCH BEGINS, SEND THIS FORM WITH THIS SECTION COMPLETED WITH POSITION DESCRIPTION AND ADVERTISEMENT TO EQUAL OPPORTUNITY PROGRAMS (EOP), ROOM 110, ADMINISTRATION BUILDING. PH: 404-727-6016.

JOB CODE _____ JOB TITLE _____

PAY GRADE ____ SALARY RANGE _____ (for non-faculty jobs, call 7-7617 to confirm salary)

DEPARTMENT # _____ DEPT NAME _____ APPLICATION _____

DEADLINE _____

DATE OPENED (For EOP Use Only) _____

Check all that apply:

- Regular Full Time Regular Part Time Short-Term Faculty Appointment (no longer than two years)
- Term Full Time Term Part Time

List publications advertising the position and any special efforts to attract female and minority applicants.

List members of Search Committee

STEP 2: AVAILABILITY POOL (OBTAIN FROM AFFIRMATIVE ACTION PLAN OR EOP)

JOB GROUP # _____ SPECIFIC DISCIPLINE or GENERAL CATEGORY _____

Total Minority % _____

Black _____

Hispanic _____

Asian _____

Native American _____

Total Women% _____

Source: Affirmative Action Plan, abridged edition, page _____

Availability Data, page _____

Professional Women and Minorities, page _____

***STEP 3: REVIEW APPLICANT POOL. BEFORE ELIMINATING ANY CANDIDATES, CALL EOP FOR APPLICANT POOL INFORMATION (BELOW)**

	Female		Male		
	#	%	#	%	
Black	_____	_____	_____	_____	
Asian	_____	_____	_____	_____	
Hispanic	_____	_____	_____	_____	
Native American	_____	_____	_____	_____	_____
White	_____	_____	_____	_____	TOTAL APPLICATIONS
Unknown	_____	_____	_____	_____	Received by Department
TOTAL	_____	_____	_____	_____	TOTAL SELF-IDs

*The Office of Equal Opportunity Programs can provide you with information concerning your applicant pool prior to interviewing. While we *strongly* encourage you to complete this step, it is optional.

STEP 4: SELECT FINAL CANDIDATES. IN THE SPACE PROVIDED BELOW, LIST INFORMATION REGARDING THE "SHORT LIST" OF APPLICANTS INCLUDING ALL THOSE INTERVIEWED.

FOR STAFF POSITIONS

All offers must be approved in advance by both EOP and Human Resources/Compensation prior to an employment offer. The SAR form and proposed starting date must be returned with resume to EOP prior to making an offer. EOP will forward SAR to Compensation for

Proposed starting salary for final candidate: \$_____ (required for non-faculty positions). Salary must be approved by Compensation prior to extending an offer. For information, call 404-727-

FOR FACULTY POSITIONS

IF A HIRING GOAL IS INDICATED (on the front of this form), return this form with curriculum vitae of final candidates and proposed starting date to EOP or the EOP representative prior to making an offer. Approval of EOP or designated EOP representative must be obtained before an official employment offer can be made.

IF A POSITION HAS NO HIRING GOAL INDICATED, the SAR must still be returned and reviewed by EOP to complete documentation requirements. List the final candidates, the reasons(s) for not selecting each applicant, and the appointment/starting date for the successful candidate. A copy of the completed SAR with appropriate signatures must be attached to the department's new hire paperwork forwarded to Human Resources.

NAME & SOCIAL SECURITY NUMBER	RACE SEX	INTERNAL Y/N	REASONS FOR SELECTION/NON-SELECTION INCLUDE PROPOSED STARTING DATE FOR SUCCESSFUL CANDIDATE
1.			
2.			
3.			
4.			

Search Committee Chairperson Phone Number Date

Department Chair Phone Number Date

Approval of Equal Opportunity Programs Date

Human Resources

EMORY UNIVERSITY
Equal Opportunity Programs
Pre-Employment Survey

To help us comply with federal/state equal employment opportunity record keeping, reporting and other legal requirements, please answer questions below. Completion of this form has no bearing on whether or not you are hired by Emory. This pre-employment questionnaire will be kept in a confidential file separate from the application for employment.

Emory does not discriminate in employment on the basis of race, color, religion, sex, sexual orientation, national origin, age, disability or veteran/Reserve/National Guard status.

SOCIAL SECURITY #:

NAME:

ADDRESS

Please fill in the appropriate response:

I prefer not to provide this information

Race/Ethnic Group

- WHITE:** Not of Hispanic Origin: *Persons having origins in any of the original peoples of Europe, North Africa, or Middle East.*
- BLACK:** Not of Hispanic Origin: *Persons having origins in any of the black- racial groups of Africa.*
- HISPANIC:** *Persons of Mexican, Puerto Rican, Cuban, Central or South American, or other Spanish culture or origin, regardless of race.*
- ASIAN or PACIFIC ISLANDER:** *persons having origins in any of the original peoples of the Far East, Southeast Asia, the Indian Subcontinent, or the Pacific Islands. This includes, for example China, Japan, Korea, the Philippine Islands, and Samoa.*
- AMERICAN INDIAN or ALASKAN NATIVE:** *Persons having origins in any of the original peoples of North America and who maintain cultural identification through tribal affiliation or community recognition.*

Referral Source:

- Employee Referral Newspaper Ad Walk—in
 Chronicle of Higher Education Internet
 Other (specify)

Sex

Female Male

Birth Date

Month Day Year

Previous Emory employment?

Yes No

Are you a disabled veteran?

Yes No

A veteran of the Vietnam Era?

Yes No

Do you have a documentable disability?

Yes No

*Anyone desiring further information regarding Emory's Affirmative Action Program, who would like this form in an alternative format, or who has a disability and would like to receive assistance during the application process, please contact:
Equal Opportunity Programs, 110 Administration Building, Atlanta, Georgia 30322-0520
404/727-6016 (V) 404/712-2049 (TDD)*

Emory University

Emory Healthcare

An Equal Opportunity/Affirmative Action Employer

EMORY EMPLOYEE TRANSFER FORM

*This application is for use by regular Emory University and Emory Hospitals employees
with at least 6 months of service in their present position.*

*INSTRUCTIONS: Complete Section A of this form and the attached education and certification/licensure forms.
Attach a resume and letters of reference. Forward all materials to your Human Resources Office.
Human Resources or the hiring department will contact you if we are interested in pursuing your application.*

SECTION A

Name of Applicant _____ Social Security Number _____

Current Department/Unit _____ Emory Univ. Emory Univ. Hosp. Crawford Long Hosp.

Home Address _____

Home Phone _____ Campus Phone _____ E-Mail Address _____

Current Position Title _____ Length of Service in Current Job _____

Current Supervisor _____ Supervisor's Title _____

May We Contact Your Current Supervisor Before an Offer Is Extended? Yes No

MY QUALIFICATIONS FOR THIS POSITION INCLUDE:

Highest degree completed:

High School Diploma/GED Associate's Degree Bachelor's Degree Master's Degree Doctorate Degree

Training, experience (include duties), and/or accomplishments

Previous Emory experience (do not include current position)

Dates Employed _____	Position _____	Department/Unit _____
Dates Employed _____	Position _____	Department/Unit _____
Dates Employed _____	Position _____	Department/Unit _____
Dates Employed _____	Position _____	Department/Unit _____

EMPLOYEE SIGNATURE _____ DATE _____

SECTION B — HUMAN RESOURCES USE ONLY

Interview Date _____ Test Results _____

Comments _____

SIGNATURE _____ DATE _____

NAME _____
Last _____ First _____
SOCIAL SECURITY NO. _____
EXPIRATION DATE _____

NAME

Last

First

SOCIAL SECURITY NO.

EXPIRATION DATE

<input type="checkbox"/> Please check here if you are updating your application. You will need to recomplete the entire form.		EMORY Application for Employment <i>An Equal Opportunity/ Affirmative Action Employer</i>		FOR HR USE ONLY Req. Number _____ Pos. Number _____ Hire Date _____ Salary _____ Recruiter _____	
PERSONAL					
COMPLETE ALL ITEMS (PLEASE PRINT IN BLACK INK.)					Today's Date
Last Name		First Name		Middle Name	
Street Address		Apt. No.		Social Security No.	
City		State		Zip Code	
Home Phone ()		Work Phone ()		Age: (check one) <input type="checkbox"/> 16 but less than 18 <input type="checkbox"/> Over 18	
Do you currently work for Emory University or Hospitals? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes: <input type="checkbox"/> Reg. <input type="checkbox"/> Temp.		Have you previously worked for Emory University or Hospitals? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes: <input type="checkbox"/> Reg. <input type="checkbox"/> Temp.		Dates: _____ Which organization? _____	
Have you ever been excluded from participation in Medicare, Medicaid or any other Federal health care program? <input type="checkbox"/> Yes <input type="checkbox"/> No If so, please give the dates of the exclusion: _____		Have you been reinstated to participate in Medicare, Medicaid or any other Federal health care program? <input type="checkbox"/> Yes <input type="checkbox"/> No		Are you currently eligible to work in the United States? <input type="checkbox"/> Yes <input type="checkbox"/> No	
Have you currently excluded from participation in Medicare, Medicaid or any other Federal health care program? <input type="checkbox"/> Yes <input type="checkbox"/> No		Have you received notice that you are under review for possible exclusion from Medicare, Medicaid or any other Federal health care program? <input type="checkbox"/> Yes <input type="checkbox"/> No		Other names used for work or school: _____ _____ _____	
REFERRAL SOURCE					
How did you hear about job opportunities at Emory? (check one)					
<input type="checkbox"/> Ad (Source): _____		<input type="checkbox"/> University's/Hospitals' Reputation		<input type="checkbox"/> Job Opportunities Bulletin	
<input type="checkbox"/> Empl. Agency (Name): _____		<input type="checkbox"/> Walk-in		<input type="checkbox"/> Internet/WWW	
<input type="checkbox"/> Job Fair (Location): _____		<input type="checkbox"/> Emory Employee (Name): _____		<input type="checkbox"/> Other: _____	
<input type="checkbox"/> Job Line (Telephone) _____					
WORK PREFERENCES					
Check all that apply:					
Status:		<input type="checkbox"/> PRN (on an as needed basis)			
<input type="checkbox"/> Full-time		Organization		Shift:	
<input type="checkbox"/> Part-time		<input type="checkbox"/> Emory University		<input type="checkbox"/> Days	
<input type="checkbox"/> Temporary Full-time		<input type="checkbox"/> Crawford Long Hospital		<input type="checkbox"/> Evenings	
<input type="checkbox"/> Temporary Part-time		<input type="checkbox"/> Emory University Hospital		<input type="checkbox"/> Nights	
		<input type="checkbox"/> Oxford College		<input type="checkbox"/> Other	
				Work Schedule:	
				<input type="checkbox"/> Monday-Friday	
				<input type="checkbox"/> Some Weekends	
				<input type="checkbox"/> All or Most Weekends	
				<input type="checkbox"/> Other:	
STUDENT STATUS					
Are you a student? <input type="checkbox"/> Yes <input type="checkbox"/> No If so, what is your status? <input type="checkbox"/> Full-time <input type="checkbox"/> Part-time Are you a student at Emory? <input type="checkbox"/> Yes <input type="checkbox"/> No School of Nursing/NEAT? <input type="checkbox"/> Yes <input type="checkbox"/> No					
EDUCATION					
Last High School Attended	Name	Location	Graduate? <input type="checkbox"/> Yes <input type="checkbox"/> No GED? <input type="checkbox"/> Yes <input type="checkbox"/> No		
Education Beyond High School	Name & Location City, State	Dates Attended (MO/YR)	Did you Graduate?	Major	Type of Degree, Diploma or Certificate Earned.
College or University		From _____ To _____	Yes _____ No _____		
College or University		From _____ To _____	Yes _____ No _____		
Graduate or Professional		From _____ To _____	Yes _____ No _____		
Trade, Vocational, Internship		From _____ To _____	Yes _____ No _____		

NAME _____ Last First SOCIAL SECURITY NO. _____

EMPLOYMENT

List employment, including military service, for the last ten years starting with your most recent employment. Give accurate information including any period(s) of unemployment longer than one month in the area provided. You are encouraged to provide a resume in addition to completing the application.

May we contact your current employer? Yes No

Previous/Current Employer	Supervisor's Name
Address _____ Number Street	Supervisor's Title
City State Zip Code	Telephone Number ()
Dates Employed From _____ To _____	Reason for Leaving
Starting Salary \$ _____ per Ending Salary \$ _____ per	Job Title Full ___ Part ___ Time

Major Duties: _____

Previous Employer	Supervisor's Name
Address _____ Number Street	Supervisor's Title
City State Zip Code	Telephone Number ()
Dates Employed From _____ To _____	Reason for Leaving
Starting Salary \$ _____ per Ending Salary \$ _____ per	Job Title Full ___ Part ___ Time

Major Duties: _____

Previous Employer	Supervisor's Name
Address _____ Number Street	Supervisor's Title
City State Zip Code	Telephone Number ()
Dates Employed From _____ To _____	Reason for Leaving
Starting Salary \$ _____ per Ending Salary \$ _____ per	Job Title Full ___ Part ___ Time

Major Duties: _____

Previous Employer	Supervisor's Name
Address _____ Number Street	Supervisor's Title
City State Zip Code	Telephone Number ()
Dates Employed From _____ To _____	Reason for Leaving
Starting Salary \$ _____ per Ending Salary \$ _____ per	Job Title Full ___ Part ___ Time

Major Duties: _____

EDUCATION

Indicate your highest level of education using one of the following Education Level codes: _____

- | | | | |
|--|---|--|-------------------------------------|
| EDUCATION LEVEL/DEGREE | 20 = 1 Year of College Work | 51 = Master's Degree (or foreign equivalent) | 81 = DDS/DMD-Dentistry |
| 0-11= Grade/High School
(Enter highest grade completed) | 21 = 2-4 Years of College Work | 59 = Doctoral Program Work | 82 = DD-Optometry |
| 12 = High School Diploma/GED | 22 = Associate's Degree (or foreign equivalent) | 60 = Doctorate | 83 = DO-Osteopathy |
| 13 = Tech/Trade School Work | 25 = Bachelor's Degree (or foreign equivalent) | 62 = PhD-Doctor of Philosophy | 84 = DPM/DP/POD.D-Podiatry |
| 14 = Tech/Trade School Certificate | 31 = Teaching Certificate | 66 = LLD/JD-Laws/Jurisprudence | 86 = DVM-Veterinary Science |
| 15 = Business School Work | 50 = Master's Program Work | 67 = DD/DMN-Divinity/Ministry | 89 = MD/PhD Combined |
| 16 = Business School Certificate | | 68 = Other Non-Medical Doctorate | 90 = Post-Doctoral Work/Non-Medical |
| 19 = Nursing Diploma | | 80 = MD-Medicine | 91 = Post Doctoral Work/Medical |

If you have attended college, enter any degree(s) obtained using the Education Level/Degree codes listed above and Major/Area of Study codes listed below:

MAJOR/AREA OF STUDY

- | | | | |
|--|--|-------------------------------------|--|
| ARCHITECTURE & ENVIRONMENTAL DESIGN | ___E035 Radio/Television | ___E072 Health Sciences | PHYSICAL SCIENCES |
| ___E001 Architecture | EDUCATION | ___E073 Histology | ___E114 Astronomy |
| ___E002 City, Community & Regional Planning | ___E036 Counseling | ___E074 Home Economics | ___E115 Astrophysics |
| ___E003 Environmental Design | ___E037 Education | ___E075 Horticulture | ___E116 Atmospheric Sciences and Meteorology |
| ___E004 Exhibition Design | ___E038 Higher Education | ___E076 Human/Child Development | ___E117 Chemistry |
| ___E005 Interior Design | ___E039 Student Personnel | ___E077 Immunology | ___E118 Geology |
| ___E006 Landscape Architecture | ___E040 Student Services Administration | ___E078 Industrial Hygiene | ___E119 Geophysics and Seismology |
| ___E007 Urban Design | ENGINEERING | ___E079 Medical Assisting | ___E120 Health Physics |
| BUSINESS & MANAGEMENT | ___E041 Architectural Engineering | ___E080 Medical Technology | ___E121 Nuclear Physics |
| ___E008 Accounting | ___E042 Bioengineering | ___E081 Medicine | ___E122 Paleontology |
| ___E009 Actuarial Sciences | ___E043 Biomedical Engineering | ___E082 Microbiology | ___E123 Physics |
| ___E010 Advertising | ___E044 Chemical Engineering | ___E083 Mortuary Science | SECRETARIAL SCIENCES |
| ___E011 Banking & Finance | ___E045 Civil Engineering | ___E084 Nuclear Medicine | ___E124 Executive |
| ___E012 Business Administration & Management | ___E046 Computer Engineering | ___E085 Nursing | ___E125 Medical |
| ___E013 Business Statistics | ___E047 Construction Engineering | ___E086 Nutritional Sciences | ___E126 Legal |
| ___E014 Computer & Information Sciences | ___E048 Electrical, Electronics and Communications Engineering | ___E087 Occupational Therapy | ___E127 Data Processing |
| ___E015 Economics | ___E049 Environmental Engineering | ___E088 Optometry | SOCIAL SCIENCES |
| ___E016 Hotel/Motel Management | ___E050 Industrial Engineering | ___E089 Pharmacology | ___E128 African American Studies |
| ___E017 Hospital/Health Administration | ___E051 Materials Engineering | ___E090 Pharmacy | ___E129 Anthropology |
| ___E018 Human Resources/Personnel | ___E052 Mechanical Engineering | ___E091 Physical Therapy | ___E130 Clinical Psychology |
| ___E019 Industrial Management | ___E053 Nuclear Engineering | ___E092 Physician Assistant | ___E131 Criminology/Criminal Justice |
| ___E020 Insurance & Risk Management | ___E054 Surveying and Mapping Science | ___E093 Public Health | ___E132 Demography |
| ___E021 International Business Management | ___E055 Systems Engineering | ___E094 Radiologic Technology | ___E133 Geography/Environmental Sciences |
| ___E022 Investments & Securities | HEALTH/LIFE SCIENCES | ___E095 Recreational Therapy | ___E134 History |
| ___E023 Labor/Industrial Relations | ___E056 Agribusiness/Agricultural Sciences | ___E096 Respiratory Therapy | ___E135 International Relations |
| ___E024 Management Information Systems | ___E057 Anatomy/Physiology | ___E097 Speech Pathology/Audiology | ___E136 Political Science and Government |
| ___E025 Marketing | ___E058 Biochemistry | ___E098 Toxicology | ___E137 Psychology |
| ___E026 Organizational Design & Behavior | ___E059 Biophysics | ___E099 Veterinary/Animal Science | ___E138 Social Sciences |
| ___E027 Public Administration | ___E060 Biology | ___E100 Zoology | ___E139 Social Work |
| ___E028 Real Estate | ___E061 Botany | LIBERAL ARTS | ___E140 Sociology |
| ___E029 Taxation | ___E062 Cell & Molecular Biology | ___E101 Archaeology | ___E141 Urban Studies |
| COMMUNICATIONS | ___E063 Chemistry | ___E102 Area/Ethnic Studies | OTHER |
| ___E030 Advertising | ___E064 Cytology | ___E103 Art History | ___E142 Divinity |
| ___E031 Communications Research | ___E065 Dentistry | ___E104 Conservator | ___E143 Law |
| ___E032 Film | ___E066 Ecology | ___E105 English | ___E144 Ministry |
| ___E033 Journalism | ___E067 Environmental Health | ___E106 Foreign Languages | ___E145 Theology |
| ___E034 Public Relations | ___E068 Epidemiology | ___E107 Historic Preservation | Other: _____ |
| | ___E069 Genetics | ___E108 Liberal/General Studies | Other: _____ |
| | ___E070 Gerontology | ___E109 Library & Archival Sciences | |
| | ___E071 Health Education | ___E110 Philosophy & Religion | |
| | | ___E111 Visual/Performing Arts | |
| | | MATHEMATICS | |
| | | ___E112 Mathematics | |
| | | ___E113 Statistics | |

LANGUAGES **DRIVER'S LICENSE INFORMATION**

Indicate your ability to speak (S), read (R) and/or write (W) any language(s) and your proficiency level(s) using the following key:

- L = Low M = Moderate H = High
- Language: _____
- | | | |
|-----------|----------|-----------|
| ___ Speak | ___ Read | ___ Write |
| ___ Speak | ___ Read | ___ Write |

- | | |
|----------------------------------|--------------------------------------|
| ___C031 Georgia driver's license | ___C099 Other state driver's license |
| Class _____ | State _____ |
| Number _____ | Class _____ |
| | Number _____ |

CERTIFICATION/LICENSURE/REGISTRATION

Indicate with an "X" which of the following certifications, licensures and registrations you currently hold. Indicate with an "E" any certifications, licensures and registrations you do not hold but for which you are eligible.

Professional Licensure, Registration or Certification (Please provide this information if applicable.)	
Type _____ No. _____	
Expiration Date _____ State _____	
Type _____ No. _____	
Expiration Date _____ State _____	
Type _____ No. _____	
Expiration Date _____ State _____	
Type _____ No. _____	
Expiration Date _____ State _____	

ADMINISTRATIVE

- C001 Certified Manager of Patient Accounts
- C100 Certified Medical Staff Coordinator
- C002 Certified Medical Transcriptionist
- C003 Certified Paralegal
- C004 Certified Patient Accounts Representative
- C005 Certified Professional Secretary (CPS)
- C101 Certified Provider Credentialing Specialist
- C006 Certified Public Accountant (CPA)
- C007 Notary Public

ALLIED HEALTH

- C008 Certified Cardiac Technician
- C009 Certified Cardiopulmonary Technologist
- C010 Certified Cardiovascular Technologist
- C011 Certified Health Education Specialist
- C012 Certified Medical Assistant
- C013 Certified Nutrition Support Dietitian
- C014 Certified Operating Room Technician
- C015 Certified Respiratory Therapy Technician
- C016 Electrocardiograph (EKG) Technician
- C017 Electroencephalograph (EEG) Technician
- C018 Emergency Medical Technician (EMT)
- C019 Exercise Therapist
- C020 Licensed Physician's Assistant
- C021 Paramedic
- C022 Registered Dietitian
- C023 Registered Respiratory Therapist

COMPUTER TECHNOLOGY

- C024 Certified Network Engineer (CNE)
- C025 Certified Network Administrator (CNA)
- C026 Certified Novell Administrator
- C027 Certified Novell Engineer
- C028 Certified Novell Instructor
- C029 Certified Repair Technician

DEVELOPMENT

- C030 Certified Fund-Raising Executive

EDUCATION

- C032 Teaching Certificate

ENGINEERING

- C033 Certified Document Technician
- C034 Licensed Architect
- C035 Licensed 2nd Class Power Engineer
- C036 Registered Architect
- C037 Registered Engineer

GENERAL CLINICAL

- C038 Cardiopulmonary Resuscitation (CPR) Instructor
- C039 Advanced Cardiac Life Support (ACLS)

HUMAN RESOURCES

- C040 Certified Employee Benefits Specialist (CEBS)
- C041 Certified Career Counselor
- C042 Certified Compensation Professional (CCP)
- C043 Professional in Human Resources (PHR)
- C044 Senior Professional in HR (SPHR)

LABORATORY

- C045 Assistant Laboratory Animal Technician (ALAT)
- C046 Certified Autopsy Technician
- C047 Certified Cytogenetic Technologist
- C048 Certified Phlebotomist
- C049 Histotechnician (HT)
- C050 Histotechnologist (HTL)
- C051 Laboratory Animal Technician (LAT)
- C052 Laboratory Animal Technologist (LATG)
- C053 Licensed Optician
- C054 Medical Laboratory Technician (MLT)
- C055 Medical Laboratory Technologist (ASCP)

LAW ENFORCEMENT

- C096 POST Certified (Georgia)
- C097 POST Certified (Out of State)
- C098 Basic Law Enforcement
- C102 Georgia Board Private Security/Detective Agency

MEDICAL RECORDS

- C056 Accredited Records Technician (ART)
- C057 Certified Professional Coder (CPC)
- C058 Certified Tumor Registrar (CTR)
- C059 Registered Records Administrator (RRA)

NURSING

- C060 Certified Nurse Administrator
- C061 Certified Nurse Midwife
- C062 Certified Nurse Practitioner
- C063 Certified Neonatal/Perinatal Nurse Practitioner

- C064 Certified Registered Nurse Anesthetist (CRNA)
- C065 Certified Nursing Assistant
- C066 Licensed Practical Nurse (LPN)
- C067 Licensed Registered Nurse (RN)

PHARMACY

- C068 Pharmacist
- C069 Pharmacy Intern
- C070 Pharmacy Technician

RADIOLOGY

- C071 Certified Mammography Technologist
- C072 Computerized Tomography (CT) Technologist
- C073 Magnetic Resonance Imaging (MRI) Technologist
- C074 Nuclear Medicine Technologist
- C075 Radiation Therapy Technologist
- C076 Radiologic Technologist
- C077 Radiology Special Procedures Technologist
- C078 Ultrasound Technologist

REHABILITATION

- C079 Licensed Occupational Therapist
- C080 Certified Occupational Therapy Assistant
- C081 Licensed Physical Therapist
- C082 Licensed Physical Therapy Assistant
- C083 Registered Recreational Therapist
- C084 Licensed Speech Pathologist
- C085 Licensed Audiologist
- C086 Vocational Rehabilitation Counselor

SOCIAL WORK

- C087 Certified Case Manager
- C088 Certified Rehabilitation Counselor
- C089 Licensed Clinical Social Worker
- C090 Licensed Master's Social Worker
- C091 Licensed Professional Counselor
- C092 Licensed Psychologist
- C093 National Certified Counselor

THEOLOGY

- C094 Certified Supervisor by the Association for Clinical Pastoral Education

TRADES

- C095 Licensed Master Cosmetologist
- C103 Licensed Master Barber

OTHER

- Other: _____
- Other: _____

IF YOU ARE HIRED: All employers are now covered by the provisions of the Immigration Control Act of 1986. This means that any person hired must bring sufficient documentation for verification of eligibility for employment within three days of employment. A valid driver's license with photo, plus an original social security card will meet the necessary requirement.

IMPORTANT STATEMENT - PLEASE READ CAREFULLY: Nothing contained in any written Human Resources policies, manuals, handbooks, publications, or other transmittals of Emory shall constitute or imply a contract of employment between Emory and any employee of such University/Hospital. Further, nothing stated or said, whether orally or in writing, to an employee of Emory shall constitute or imply a contract between Emory and the employee. Emory reserves the right to terminate the employment of an employee with or without cause and to modify terms and conditions of employment, including (without limitation) salary and benefits at any time. Emory reserves the right to discontinue or change any employee benefit program without notice except such notice as may be required by law.

CERTIFICATION: I understand that my signature on this application form certifies that all information which I provide related to my application for employment (including skills inventory) with Emory University and Hospitals is true and complete to the best of my knowledge, and that falsification of any such information may be grounds for disciplinary action should I become employed. I hereby authorize all past employers, companies, schools and persons to release either orally or in writing the information requested by Emory Human Resources to verify my work and/or training experience. I understand that this information will be used solely for the purpose of determining my qualifications except as may otherwise be required by law. I understand that this application and information received in conjunction with it becomes the property of Emory.

SIGNATURE OF APPLICANT _____	DATE _____	Processed by _____
EUHR/jam/2/10/98 D71; REV/wml/11/10/99/employ.application99		Location _____

EMORY UNIVERSITY

DRUG TESTING CONSENT

I hereby acknowledge that Emory University has requested that I consent to drug testing if I receive an offer of employment, which will be conditioned upon a negative drug test. I understand that I may refuse to submit to testing. I understand that my offer of employment will be automatically withdrawn and that I will not become an employee of Emory University if the test result is positive, if I refuse to consent to testing, or if there is evidence which indicates (in the opinion of Emory or of the testing laboratory) that the testing sample was tampered with, substituted or altered in any way.

I understand that the test will detect illegal drugs, other non-prescribed intoxicants and some prescription drugs. I understand that a positive test result caused by the appropriate use of legally prescribed medications that do not cause unsafe or unacceptable job performance will not affect my employment.

I hereby voluntarily consent to be tested for drugs. I voluntarily consent to testing by any method that Emory University deems reasonable and reliable, including urinalysis. I also consent to the release of the test results to Emory University, or any Emory affiliate that employs me.

Name (Please Print)

Signature

Date

Social Security Number

EMORY UNIVERSITY

DRIVING CONSENT FORM

I hereby authorize Emory University to receive any driving record information that pertains to me which may be in the files of any state or local motor vehicle records agency.

Full Name (printed in Ink)

Social Security Number

Date of Birth

Street Address

City

State

Zip

Driver's License Number

State of Issue

Signature

Date

Witness

Date

EMORY

EMPLOYMENT VERIFICATION FORM

INSTRUCTIONS

The objective of employment verification is to seek information about the applicant's previous job duties and his or her performance in that role. Keep all questioning job related. Do not ask questions that pertain to topics outside the realm of job performance and duties such as disabilities, worker's compensation claims, illness, race, color, age, marital status, religion, sex, sexual orientation, national origin, and veteran/Reserve/National Guard status. *Completed references must be returned to the Employment Representative in Human Resources prior to an offer being made.*

HR recruiter: _____

Candidate name: _____ SS# _____

Emory position applied for: _____

Department focus for reference: _____

Name of reference: _____ Title _____

Company name: _____ Phone # _____

Relationship to candidate (check one): Direct Supervisor Indirect Supervisor Peer Personal

How long did the reference supervise the candidate: _____

Position status (check one): Full-time Part-time Temporary

1. List responsibilities of the position held. Reiterate, to the reference, job title, duties & dates of employment as shown on the candidate's resume/application. Indicate if accurate, or list any discrepancies.

2. What skills were most called upon in this position in order to perform these responsibilities?

3. What was his or her reason for leaving (salary, schedule, personal, interpersonal office relationships, career, etc)?

4. Would you rehire the candidate in the same capacity or do you suggest a different position?

5. How did the candidate add value to the company/organization?

6. Did the candidate demonstrate any leadership qualities (please check)? Yes No

Explain _____

7. How well did the candidate adapt to change?

8. Describe the candidate in one word or phrase.

9. Describe the candidate's strengths.

10. Describe areas in which improvement is needed.

11. How did the candidate respond to difficult situations or challenges?

12. Was this applicant more productive working as an individual or in team situations?

13. How did the candidate handle rules and direction by others?

14. How did the candidate pace himself or herself with the workload?

15. Attendance (please check): Problem No Problem If a problem, was it resolved? Yes No
Explain _____

16. Tardiness (please check): Problem No Problem If a problem, was it resolved? Yes No
Explain _____

17. Overall performance (check one): Exceeds Standards Meets Standards Does Not Meet Standards

18. Is there anything else you wish to add to aid us in making our hiring decision?

Signature of individual completing reference

Date

DEGREE VERIFICATION (to be completed by Employment Staff)

College/University _____

Date attended/graduated _____

Degree/Major _____

Person providing information _____

Signature of individual completing verification

Date

Form W-4 (2002)

Purpose. Complete Form W-4 so your employer can withhold the correct Federal income tax from your pay. Because your tax situation may change, you may want to refigure your withholding each year.

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 2002 expires February 16, 2003. See **Pub. 505**, Tax Withholding and Estimated Tax.

Note: You cannot claim exemption from withholding if (a) your income exceeds \$750 and includes more than \$250 of unearned income (e.g., interest and dividends) and (b) another person can claim you as a dependent on their tax return.

Basic instructions. If you are not exempt, complete the **Personal Allowances Worksheet** below. The worksheets on page 2 adjust your withholding allowances based on itemized deductions, certain credits, adjustments to

income, or two-earner/two-job situations. Complete all worksheets that apply. **However, you may claim fewer (or zero) allowances.**

Head of household. Generally, you may 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 line **E** below.

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. 919**, How Do I Adjust My Tax Withholding? 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.

Two earners/two 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.

Nonresident alien. If you are a nonresident alien, see the **Instructions for Form 8233** before completing this Form W-4.

Check your withholding. After your Form W-4 takes effect, use Pub. 919 to see how the dollar amount you are having withheld compares to your projected total tax for 2002. See Pub. 919, especially if you used the **Two-Earner/Two-Job Worksheet** on page 2 and your earnings exceed \$125,000 (Single) or \$175,000 (Married).

Recent name change? If your name on line 1 differs from that shown on your social security card, call 1-800-772-1213 for a new social security card.

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 \$1,000 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 \$1,500 of child or dependent care expenses for which you plan to claim a credit **F** _____

(Note: Do not include child support payments. See Pub. 503, Child and Dependent Care Expenses, for details.)

G Child Tax Credit (including additional child tax credit):
 • If your total income will be between \$15,000 and \$42,000 (\$20,000 and \$65,000 if married), enter "1" for each eligible child plus **1 additional** if you have three to five eligible children or **2 additional** if you have six or more eligible children.
 • If your total income will be between \$42,000 and \$80,000 (\$65,000 and \$115,000 if married), enter "1" if you have one or two eligible children, "2" if you have three eligible children, "3" if you have four eligible children, or "4" if you have five or more eligible children. **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 have more than one job or are married and you and your spouse both work and the combined earnings from all jobs exceed \$35,000, see the **Two-Earner/Two-Job 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.

Cut 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		OMB No. 1545-0010 2002
1 Type or print your first name and middle initial Last name		2 Your social security number		
Home address (number and street or rural route)		3 <input type="checkbox"/> Single <input type="checkbox"/> Married <input type="checkbox"/> 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 on your social security card, check here. You must call 1-800-772-1213 for a new card. <input type="checkbox"/>		
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 2002, 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				
Under penalties of perjury, I certify that I am entitled to the number of withholding allowances claimed on this certificate, or I am entitled to claim exempt status.				
Employee's signature (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

Deductions and Adjustments Worksheet

Note: Use this worksheet only if you plan to itemize deductions, claim certain credits, or claim adjustments to income on your 2002 tax return.

- 1** Enter an estimate of your 2002 itemized deductions. These include qualifying home mortgage interest, charitable contributions, state and local taxes, medical expenses in excess of 7.5% of your income, and miscellaneous deductions. (For 2002, you may have to reduce your itemized deductions if your income is over \$137,300 (\$68,650 if married filing separately). See **Worksheet 3** in Pub. 919 for details.) . . . **1** \$ _____
- 2** Enter:

{	\$7,850 if married filing jointly or qualifying widow(er)	}	2	\$ _____
	\$6,900 if head of household				
	\$4,700 if single				
	\$3,925 if married filing separately				
- 3** **Subtract** line 2 from line 1. If line 2 is greater than line 1, enter "-0-". **3** \$ _____
- 4** Enter an estimate of your 2002 adjustments to income, including alimony, deductible IRA contributions, and student loan interest **4** \$ _____
- 5** **Add** lines 3 and 4 and enter the total. Include any amount for credits from **Worksheet 7** in Pub. 919. **5** \$ _____
- 6** Enter an estimate of your 2002 nonwage income (such as dividends or interest) **6** \$ _____
- 7** **Subtract** line 6 from line 5. Enter the result, but not less than "-0-". **7** \$ _____
- 8** **Divide** the amount on line 7 by \$3,000 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-Earner/Two-Job 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-Earner/Two-Job Worksheet

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 **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 4-9 below to calculate 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 2002. For example, divide by 26 if you are paid every two weeks and you complete this form in December 2001. 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: Two-Earner/Two-Job Worksheet

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	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 - \$4,000	0	44,001 - 50,000	8	\$0 - \$6,000	0	75,001 - 95,000	8
4,001 - 9,000	1	50,001 - 55,000	9	6,001 - 11,000	1	95,001 - 110,000	9
9,001 - 15,000	2	55,001 - 65,000	10	11,001 - 17,000	2	110,001 and over	10
15,001 - 20,000	3	65,001 - 80,000	11	17,001 - 23,000	3		
20,001 - 25,000	4	80,001 - 95,000	12	23,001 - 28,000	4		
25,001 - 32,000	5	95,001 - 110,000	13	28,001 - 38,000	5		
32,001 - 38,000	6	110,001 - 125,000	14	38,001 - 55,000	6		
38,001 - 44,000	7	125,001 and over	15	55,001 - 75,000	7		

Table 2: Two-Earner/Two-Job Worksheet

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 - \$50,000	\$450	\$0 - \$30,000	\$450
50,001 - 100,000	800	30,001 - 70,000	800
100,001 - 150,000	900	70,001 - 140,000	900
150,001 - 270,000	1,050	140,001 - 300,000	1,050
270,001 and over	1,150	300,001 and over	1,150

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. The Internal Revenue Code requires this information under sections 3402(f)(2)(A) and 6109 and their regulations. **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 also 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, and the District of Columbia for use in administering their tax laws, and using it in the National Directory of New Hires.

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 time needed to complete this form will vary depending on individual circumstances. The estimated average time is: **Recordkeeping**, 46 min.; **Learning about the law or the form**, 13 min.; **Preparing the form**, 59 min. If you have comments concerning the accuracy of these time estimates or suggestions for making this form simpler, we would be happy to hear from you. You can write to the Tax Forms Committee, Western Area Distribution Center, Rancho Cordova, CA 95743-0001. **Do not** send the tax form to this address. Instead, give it to your employer.



EMORY UNIVERSITY

DIRECT DEPOSIT AUTHORIZATION FORM

Payroll Office....1762 Clifton Road....Atlanta GA 30322...404-727-6100

_____ START: I authorize you and the financial institution listed below to deposit my net pay automatically to my account(s) each payday, and to initiate adjustments, if necessary, for any entries made in error to my accounts.

_____ CHANGE CHECKING: I authorize you to change my direct deposit to the account(s) at the financial institution listed below.

_____ CHANGE SAVINGS: I authorize you to change my direct deposit to the account(s) at the financial institution listed below/or savings amount.

_____ STOP: I authorize you to stop the direct deposit of my net paycheck.
_____ Checking Account _____ Savings Account _____ Both

BANK INFORMATION

STAPLE *
HERE *

1. CHECKING ACCOUNT:

NAME OF BANK: _____ ACCOUNT NUMBER: _____

2. SAVINGS ACCOUNT:

NAME OF BANK: _____ ACCOUNT NUMBER: _____

AMOUNT TO SAVINGS \$ _____ -or- NET

PERSONAL INFORMATION

NAME (Please Print): _____

SOCIAL SECURITY NUMBER: _____ DAYTIME PHONE: _____

SIGNATURE: _____ DATE: _____

FOR PAYROLL USE ONLY

EMPL ID.# _____ MONTHLY _____ BIWEEKLY _____

TIME AND ATTENDANCE SYSTEM (TAS)

Emory University uses an electronic Time and Attendance System (TAS). Bi-weekly employees record their paid time (worked time and paid leave) by telephone. The system can also be used to check leave balances.

PERSONAL ACCESS

Using a personal access code, employees may call in from most campus telephones. Those who regularly work off-campus may call in from a remote location. The TAS is available 7 days a week, 24 hours a day, allowing total flexibility to meet any work schedule.

The system records hours as they are worked. Employees may call in and check the total hours recorded for the current pay period, as well as their vacation and sick leave balances.

HOURS PAID

Forty hours (or less) in a week are paid as regular hours. Hours worked over 40 in a week are automatically paid as overtime. Shift differentials are also calculated automatically.

MEAL PERIODS

Each department determines the meal period to be deducted for their employees. The standard meal period will be deducted automatically, so no action is needed when a standard meal break is taken. However, if an employee takes more or less time for a meal, a call-in is needed to override the automatic deduction.

TIME KEEPERS

“Timekeepers” are designated within each department to coordinate employees’ use of the TAS. Timekeepers are responsible for training employees on the system, correcting errors, assisting with problems, and generally ensuring that the TAS is used properly.

NEW EMPLOYEES

New employees are trained on how to use the TAS by the department timekeeper as soon as possible after starting work. The timekeeper provides new employees with all the information needed to use the system quickly and efficiently.

WHO TO CONTACT

If you have questions about the TAS, please contact your timekeeper.

TAS — IT’S ABOUT TIME!