



SMUSM

**HIRING PROCEDURES
FOR NEW
ADJUNCT FACULTY**



New Adjunct Faculty Employee Checklist

Employee Name: _____ SMU ID #: _____
If you don't have an SMU ID, HR will assign one.

Start Date: _____

Complete the following steps **on or prior to your first day of work:**

- Visit the Department of Human Resources on or prior to your first day of work to complete the *Form I-9* and present documents to a HR representative that establish identity and work authorization.
 - The list of acceptable documents to complete the *Form I-9* is on the following page. Please bring your documents with you and remember that **all documents must be originals (copies are not accepted) and unexpired.**
 - Office hours are 8:30 a.m. to 5:00 p.m. HR is on east campus, in the Expressway Tower, located at 6116 N. Central Expressway, 2nd floor, Suite 200, Dallas, TX, 75206. For questions or directions call 214-768-3311. [Location and parking information.](#)
 - SMU is required by federal law to complete an Employment Verification Form (Form I-9) for all employees. Please note that the federal government may impose civil penalties on SMU when a new employee has not completed the Form I-9 appropriately. See www.uscis.gov for further details.
- Complete the *Temporary Employee Statement* within this packet
- Complete the *Authorization & Consent Form for Background Check* within this packet

When you visit HR, on or prior to your first day of work, you will turn in the Temporary Employee Statement and Authorization & Consent Form for Background Check. HR will initial below confirming completion of new employee processing. **Bring this New Adjunct Faculty Employee Checklist with you to HR.** Complete your name and start date at the top.

(HR USE ONLY)		
New Employee Paperwork	Date Submitted to HR	HR Representative's Signature
<input type="checkbox"/> Form I-9		
<input type="checkbox"/> Temporary Employee Statement		
<input type="checkbox"/> Authorization & Consent Form for Background Check		

After you've completed new employee processing:

- Check with your department to ensure that they've submitted a Payroll Authorization Form (PAF) to HR for processing. HR will forward the PAF to Payroll so that Payroll can enter your new job data.
- Payroll must enter your job data before you can complete the following items:
 - Pick-up **SMU ID card** at Parking & ID Services Offices located at the Hughes Trigg Student Center Room 216. Questions? Call Parking and ID Services at 214-768-7275
 - **Activate SMU account** & create account password at <https://smu.edu/activate> Need Help? 214-768-HELP (4357)
 - Submit your **Direct Deposit Enrollment and W-4 Elections** via my.SMU.edu (See instructions within this packet). Questions? Call payroll at 214-768-2073

IMPORTANT: Show this form to your supervisor after you've completed the required new employee processing. This checklist is for your records only.

LISTS OF ACCEPTABLE DOCUMENTS

All documents must be UNEXPIRED

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

LIST A Documents that Establish Both Identity and Employment Authorization	OR	LIST B Documents that Establish Identity	AND	LIST C Documents that Establish Employment Authorization
<ol style="list-style-type: none"> 1. U.S. Passport or U.S. Passport Card 2. Permanent Resident Card or Alien Registration Receipt Card (Form I-551) 3. Foreign passport that contains a temporary I-551 stamp or temporary I-551 printed notation on a machine-readable immigrant visa 4. Employment Authorization Document that contains a photograph (Form I-766) 5. For a nonimmigrant alien authorized to work for a specific employer because of his or her status: <ol style="list-style-type: none"> a. Foreign passport; and b. Form I-94 or Form I-94A that has the following: <ol style="list-style-type: none"> (1) The same name as the passport; and (2) An endorsement of the alien's nonimmigrant status as long as that period of endorsement has not yet expired and the proposed employment is not in conflict with any restrictions or limitations identified on the form. 6. Passport from the Federated States of Micronesia (FSM) or the Republic of the Marshall Islands (RMI) with Form I-94 or Form I-94A indicating nonimmigrant admission under the Compact of Free Association Between the United States and the FSM or RMI 	OR	<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, gender, 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, gender, 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 <li style="text-align: center;">For persons under age 18 who are unable to present a document listed above: 10. School record or report card 11. Clinic, doctor, or hospital record 12. Day-care or nursery school record 	AND	<ol style="list-style-type: none"> 1. A Social Security Account Number card, unless the card includes one of the following restrictions: <ol style="list-style-type: none"> (1) NOT VALID FOR EMPLOYMENT (2) VALID FOR WORK ONLY WITH INS AUTHORIZATION (3) VALID FOR WORK ONLY WITH DHS AUTHORIZATION 2. Certification of report of birth issued by the Department of State (Forms DS-1350, FS-545, FS-240) 3. Original or certified copy of birth certificate issued by a State, county, municipal authority, or territory of the United States bearing an official seal 4. Native American tribal document 5. U.S. Citizen ID Card (Form I-197) 6. Identification Card for Use of Resident Citizen in the United States (Form I-179) 7. Employment authorization document issued by the Department of Homeland Security

Examples of many of these documents appear in Part 13 of the Handbook for Employers (M-274).

Refer to the instructions for more information about acceptable receipts.



Temporary Employee Statement (Staff/Adjunct)

Employee Legal Name: Legal name as it appears on your social security card		SMU ID #: _____	
Last Name:	First Name:	Middle Name:	
Date of Birth:		Social Security Number:	
Sex: <input type="checkbox"/> Male <input type="checkbox"/> Female		Marital Status: <input type="checkbox"/> Single <input type="checkbox"/> Married	
Home Address:			
Number and Street:			
City:		State:	Zip Code:
Phone Numbers:			
Home:		Cell:	
Highest Education Level:			
<input type="checkbox"/> HS Grad or Equivalent <input type="checkbox"/> Associate Level Degree		<input type="checkbox"/> Bachelor's Level Degree <input type="checkbox"/> Master's Level Degree	
		<input type="checkbox"/> Doctorate (Academic) <input type="checkbox"/> Doctorate (Professional)	
Degree	Major	Institution	Year Awarded
Emergency Contact Information:			
Name:		Relationship:	Phone Number:
Work Authorization Status:			
Citizenship Status:			
<input type="checkbox"/> U.S. Citizen <input type="checkbox"/> Permanent Resident <input type="checkbox"/> Non-Resident Alien			
Country of Citizenship: _____		Visa Information: <input type="checkbox"/> F-1 <input type="checkbox"/> J-1 <input type="checkbox"/> H-1 <input type="checkbox"/> Other _____	

HUMAN RESOURCES USE ONLY:

Employment Classification: Temporary Staff Adjunct Faculty Student Worker (Summer Only)
New Hire Paperwork Completed: Form I-9 Authorization & Consent Form



Temporary Employee Statement (Staff/Adjunct)

Are you legally authorized to work in the United States for any employer?

Yes No

If under the age of 16, please state your age: _____

How did you hear about this job (for Temporary Staff only)?

Have you ever worked for SMU?

Yes No

If yes, explain where and provide approximate date (mm/yy)

Do you have a relative employed by SMU?

Yes No

If yes, please give the relative's name, relationship and position.

Would you be working in the same area as your relative?

Yes No

Your responses to the questions below will not necessarily disqualify you from consideration for employment. Your responses will be considered in relationship to the circumstances, your skills and the requirements of the position for which you are applying.

Have you ever been convicted or plead guilty before a court for any federal, state or municipal criminal offense?

Yes No

If yes, please provide details below

Date of Charge/Offense	State and County	Description of Charge/Offense	Details of Conviction

Have you ever received deferred adjudication or similar disposition for any federal, state or municipal offense?

Yes No

If yes, please provide details below

Date of Charge/Offense	State and County	Description of Charge/Offense	Details of Offense



Temporary Employee Statement (Staff/Adjunct)

Race/Ethnicity:

Do you consider yourself to be Hispanic/Latino(a)? Yes No

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

In addition, select one or more of the following racial categories to describe yourself. If you select two or more racial categories, please select one as primary.

Racial Categories	Primary	Definition
<input type="checkbox"/> American Indian or Alaska Native	<input type="checkbox"/>	A person having origins in any of the original peoples of North and South America (including Central America), and who maintains tribal affiliation or community attachment.
<input type="checkbox"/> Asian	<input type="checkbox"/>	A person having origins in any of the original peoples of the Far East, Southeast Asia, or the Indian subcontinent, including, for example, Cambodia, China, India, Japan, Korea, Malaysia, Pakistan, the Philippine Islands, Thailand, and Vietnam.
<input type="checkbox"/> Black or African American	<input type="checkbox"/>	A person having origins in any of the black racial groups of Africa.
<input type="checkbox"/> Native Hawaiian or Pacific Islander	<input type="checkbox"/>	A person having origins in any of the original peoples of Hawaii, Guam, Samoa, or other Pacific Islands.
<input type="checkbox"/> White	<input type="checkbox"/>	A person having origins in any of the original peoples of Europe, the Middle East, or North Africa.

Veteran Status and Disability:

SMU is an equal opportunity and affirmative action employer. This confidential information is voluntary and requested for Federal reporting purposes. To request a reasonable accommodation on the basis of a disability, please contact the ADA/504 Coordinator in the Office of Institutional Access and Equity located in Perkins Administration Building 204 (www.smu.edu/iae).

We encourage you to complete the voluntary self-identification of disability form.

Veteran Status: (Please select all that apply)	Definition
<input type="checkbox"/> Disabled Veteran	A veteran of the U.S. military, ground, naval, or air service, who is entitled to compensation (or who but for the receipt of military retired pay would be entitled to compensation) under laws administered by the Secretary of the Veterans Affairs, or a person who was discharged or released from active duty because of a service-connected disability.
<input type="checkbox"/> Recently Separated Veteran (Date of military discharge: ____/____/____)	Any veteran during the three-year period beginning on the date of such veteran's discharge or release from active duty in the U.S. military, ground, naval or air service.
<input type="checkbox"/> Active Duty Wartime or Campaign Badge Veteran/Other Protected Veteran	A veteran who served on active duty in the U.S. military, ground, naval, or air service during a war or in a campaign or expedition for which a campaign badge has been authorized, under the laws administered by the Department of Defense.
<input type="checkbox"/> Armed Forces Service Medal Veteran	Any veteran who, while serving on active duty in the U.S. military, ground, naval, or air service, participated in a United States military operation for which an Armed Forces service medal was awarded pursuant to Executive Order 12985 (61 FR 1209).

I certify that statements I have made in this employee personal data information form are true, complete and correct to the best of my knowledge and belief.

Signature

Date

Temporary Employee Statement (Staff/Adjunct)

Voluntary Self-Identification of Disability

Form CC-305
OMB Control Number 1250-0005
Expires 1/31/2017
Page 1 of 2

Why are you being asked to complete this form?

Because we do business with the government, we must reach out to, hire and provide equal opportunity to qualified people with disabilities. To help us measure how well we are doing, we are asking you to tell us if you have a disability or if you ever had a disability. Completing this form is voluntary, but we hope that you will choose to fill it out. If you are applying for a job, any answer you give will be kept private and will not be used against you in any way.

If you already work for us, your answer will not be used against you in any way. Because a person may become disabled at any time, we are required to ask all of our employees to update their information every five years. You may voluntarily self-identify as having a disability on this form without fear of any punishment because you did not identify as having a disability earlier.

How do I know if I have a disability?

You are considered to have a disability if you have a physical or mental impairment or medical condition that substantially limits a major life activity, or if you have a history or record of such an impairment or medical condition.

Disabilities include, but are not limited to:

- Blindness
- Deafness
- Cancer
- Diabetes
- Epilepsy
- Autism
- Cerebral palsy
- HIV/AIDS
- Schizophrenia
- Muscular dystrophy
- Bipolar disorder
- Major depression
- Multiple sclerosis (MS)
- Missing limbs or partially missing limbs
- Post-traumatic stress disorder (PTSD)
- Obsessive compulsive disorder
- Impairments requiring the use of wheelchair
- Intellectual disability (previously called mental retardation)

Please check one of the boxes below:

- Yes, I have a disability (or previously had a disability)
- No, I don't have a disability
- I don't wish to answer

Your Name

Today's Date

Temporary Employee Statement (Staff/Adjunct)

Voluntary Self-Identification of Disability

Form CC-305
OMB Control Number 1250-0005
Expires 1/31/2017
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Reasonable Accommodation of Notice

Federal law requires employers to provide reasonable accommodation to qualified individuals with disabilities. Please tell us if you require a reasonable accommodation to apply for a job or to perform your job. Examples of reasonable accommodation include making a change to the application process or work procedures, providing documents in an alternate format, using a sign language interpreter, or using specialized equipment.

Section 503 of the Rehabilitation Act of 1973, as amended. For more information about this form or the equal employment obligations of Federal contractors, visit the U.S. Department of Labor's Office of Federal Contract Compliance Programs (OFCCP) website at www.dol.gov/ofccp.

PUBLIC BURDEN STATEMENT: According to the Paperwork Reduction Act of 1995 no persons are required to respond to a collection of information unless such collection displays a valid OMB control number. This survey should take about 5 minutes to complete.



Temporary Employee Statement (Staff/Adjunct)

Temporary Assignment Information	
Position/Job Title:	Department:
Start Date:	End Date:
Average hours scheduled to work per week:	Negotiated Hourly Rate:
Supervisor/Department Contact:	Supervisor/Department Contact Phone#:
Please check one:	
<input type="checkbox"/> Adjunct Faculty	<ul style="list-style-type: none"> Adjunct Faculty teach on a part-time basis, typically employed by the semester or by the academic year to teach up to one-half load.
<input type="checkbox"/> Temporary Staff – Occasional/As-Needed	<ul style="list-style-type: none"> Temporary staff who work periodically throughout the year on an as-needed basis. They are often set up for a full year and log hours when they come to work, often to relieve regular staff during peak times or when someone is out of the office for a limited period of time. Retirees are often employed in this capacity as are personal trainers in Recreational Sports and on-call Wellness instructors.
<input type="checkbox"/> Temporary Staff – Academic Related	<ul style="list-style-type: none"> Temporary staff who work part-time (typically 20 hours or less per week) on a consistent basis throughout the year as tutors, advisors, and other academic-related roles.
<input type="checkbox"/> Temporary Staff – Paid from a Grant	<ul style="list-style-type: none"> Temporary staff who are paid from a grant. Typically work in support of specific, limited-duration research projects. They may work full-time or part-time.
<input type="checkbox"/> Temporary Staff – Student	<ul style="list-style-type: none"> SMU students not enrolled in for-credit classes who are performing work at the University. Temporary staff who are students at other universities (including non-SMU students) or high schools, who are employed at SMU for the summer months or other times during the academic year, who work as part of a planned program, often an internship. Student status is the primary role.
<input type="checkbox"/> Temporary Staff – Short-Term Assignment	<ul style="list-style-type: none"> Temporary staff who are hired for one month or less for a very specific business need or project and will not be renewed after the month is over. Examples include camp staff, instructors for short classes, and staff hired to work on large mailings or similar short-term projects.
<input type="checkbox"/> Temporary Staff – Vacant position/Temporary Business Need	<ul style="list-style-type: none"> Temporary staff who are filling a vacant, regular position. The position may or may not yet have approval to recruit for a regular new hire. Assignments should be for 3 months or less. Temporary staff hired for a temporary business need or specific project. Assignments should be for 3 months or less. They may work full-time or part-time hours.

Temporary Employee Statement (Staff/Adjunct)

Please Read Carefully and Sign Below

As a temporary employee, all work schedules are based upon the needs of the University and may be subject to change on a weekly basis.

1. I certify that statements I have made in this document are true, complete and correct to the best of my knowledge and belief. I understand that any false statements or omissions I make in connection with this document may be grounds for dismissal after employment, regardless of when or how discovered.
2. To ensure compliance with federal law, the following statement accompanies all offers of employment to U.S. citizens and non-citizens alike: Employment is contingent upon your ability to provide documentation establishing your identity, immigration status and eligibility to work in the U.S.
3. Southern Methodist University will conduct a criminal and/or credit investigation as specified when deemed necessary by the University. Southern Methodist University (SMU) is also authorized to use any information obtained from its investigations to determine my suitability for employment. I understand that continued employment may be contingent upon a satisfactory criminal background and/or credit investigation.
4. I agree to abide by the policies, procedures, rules and regulations of Southern Methodist University applicable to the temporary assignment. I acknowledge the University's right to revise, at any time, its policies, procedures, rules and regulations and I agree to abide by and be governed by such revisions.
5. I understand that Southern Methodist University is a subscriber to the Texas Worker's Compensation System. I further understand and agree as a temporary employee I must comply with SMU's safety rules, policies and procedures. I understand that failure on my part to follow the safety rules applicable to the temporary assignment may be grounds for disciplinary action, including termination of employment.
6. I understand and agree that the University may withhold pay from my paycheck for any legal debt I may owe the University during my employment or at termination.
7. It is the policy of SMU to afford equal opportunity to all employees and applicants for employment without regard to race, color, religion, national origin, sex, age, or disability, and to afford equal opportunities to disabled veterans, veterans of the Vietnam era, and individuals with a disability, any and other characteristic protected by Federal, State or Local law.
8. I further understand that all confidential information, and any materials/documents developed during my employment are considered proprietary and the intellectual property of SMU.

I acknowledge that I have read and understand the above statements and hereby grant permission to confirm the information supplied on this document by me.

Date

Signature

Print

**CONSUMER DISCLOSURE AND AUTHORIZATION REGARDING
BACKGROUND INVESTIGATION FOR EMPLOYMENT PURPOSES**

Disclosure

Southern Methodist University may request from a consumer reporting agency and for employment-related purposes, a “consumer report(s)” (commonly known as “background reports”) containing background information about you in connection with your employment or application for employment (including independent contractor or volunteer assignments, as applicable).

HireRight, Inc. (“HireRight”) will prepare or assemble the background reports for the Southern Methodist University. HireRight is located and can be contacted at 3349 Michelson Drive, Suite 150, Irvine, CA 92612, (800) 400-2761, www.hireright.com.

The background report(s) may contain information concerning your character, general reputation, personal characteristics, mode of living, or credit standing. The types of background information that may be obtained include, but are not limited to: criminal history; litigation history; motor vehicle record and accident history; social security number verification; address and alias history; credit history; verification of your education, employment and earnings history; professional licensing, credential and certification checks; drug/alcohol testing results and history; military service; and other information.

Authorization

I hereby authorize Southern Methodist University to obtain the consumer reports described above about me.

Applicant Name _____

Applicant Signature _____ Date _____

**OTHER DISCLOSURES, ACKNOWLEDGMENTS & AUTHORIZATION REGARDING
BACKGROUND INVESTIGATION FOR EMPLOYMENT PURPOSES**

Investigative Consumer Report:

An “investigative consumer report” is a background report that includes information from personal interviews (except in California, where that term includes background reports with or without information obtained from personal interviews), the most common form of which is checking personal or professional references through personal interviews with sources such as your former employers and associates, and other information sources. The investigative consumer report may contain information concerning your character, general reputation, or personal characteristics. You may request more information about the nature and scope of an investigative consumer report, if any, by contacting Southern Methodist University.

Ongoing Authorization:

If Southern Methodist University hires you or contracts for your services, Southern Methodist University may obtain additional consumer reports and investigative consumer reports about you without asking for your authorization again, throughout your employment or your contract period, as allowed by law.

Summary of Rights under the Fair Credit Reporting Act:

A summary of your rights under the Fair Credit Reporting Act is being provided to you separately.

HireRight Privacy Policy:

Information about HireRight’s privacy practices is available at www.hireright.com/Privacy-Policy.aspx.

Para información en español, visite <http://www.consumerfinance.gov/learnmore> o escribe a la Consumer Financial Protection Bureau, 1700 G Street N.W., Washington DC 205

**CONSUMER DISCLOSURE AND AUTHORIZATION REGARDING
BACKGROUND INVESTIGATION FOR EMPLOYMENT PURPOSES**

A Summary of Your Rights Under the Fair Credit Reporting Act

The federal Fair Credit Reporting Act (FCRA) promotes the accuracy, fairness, and privacy of information in the files of consumer reporting agencies. There are many types of consumer reporting agencies, including credit bureaus and specialty agencies (such as agencies that sell information about check writing histories, medical records, and rental history records). Here is a summary of your major rights under the FCRA. **For more information, including information about additional rights, go to www.consumerfinance.gov/learnmore or write to: Consumer Financial Protection Bureau, 1700 G Street N.W., Washington, DC 20552.**

- **You must be told if information in your file has been used against you.** Anyone who uses a credit report or another type of consumer report to deny your application for credit, insurance, or employment - or to take another adverse action against you - must tell you, and must give you the name, address, and phone number of the agency that provided the information.
- **You have the right to know what is in your file.** You may request and obtain all the information about you in the files of a consumer reporting agency (your “file disclosure”). You will be required to provide proper identification, which may include your Social Security number. In many cases, the disclosure will be free. You are entitled to a free file disclosure if:
 - a person has taken adverse action against you because of information in your credit report;
 - you are the victim of identity theft and place a fraud alert in your file;
 - your file contains inaccurate information as a result of fraud;
 - you are on public assistance;
 - you are unemployed but expect to apply for employment within 60 days.
- In addition, all consumers are entitled to one free disclosure every 12 months upon request from each nationwide credit bureau and from nationwide specialty consumer reporting agencies. See www.consumerfinance.gov/learnmore for additional information.
- **You have the right to ask for a credit score.** Credit scores are numerical summaries of your credit-worthiness based on information from credit bureaus. You may request a credit score from consumer reporting agencies that create scores or distribute scores used in residential real property loans, but you will have to pay for it. In some mortgage transactions, you will receive credit score information for free from the mortgage lender.
- **You have the right to dispute incomplete or inaccurate information.** If you identify information in your file that is incomplete or inaccurate, and report it to the consumer reporting agency, the agency must investigate unless your dispute is frivolous. See www.consumerfinance.gov/learnmore for an explanation of dispute procedures.
- **Consumer reporting agencies must correct or delete inaccurate, incomplete, or unverifiable information.** Inaccurate, incomplete or unverifiable information must be removed or corrected, usually within 30 days. However, a consumer reporting agency may continue to report information it has verified as accurate.

**CONSUMER DISCLOSURE AND AUTHORIZATION REGARDING
BACKGROUND INVESTIGATION FOR EMPLOYMENT PURPOSES**

- Consumer reporting agencies may not report outdated negative information. In most cases, a consumer reporting agency may not report negative information that is more than seven years old, or bankruptcies that are more than 10 years old.
- Access to your file is limited. A consumer reporting agency may provide information about you only to people with a valid need -- usually to consider an application with a creditor, insurer, employer, landlord, or other business. The FCRA specifies those with a valid need for access.
- **You must give your consent for reports to be provided to employers.** A consumer reporting agency may not give out information about you to your employer, or a potential employer, without your written consent given to the employer. Written consent generally is not required in the trucking industry. For more information, go to www.consumerfinance.gov/learnmore.
- **You may limit "prescreened" offers of credit and insurance you get based on information in your credit report.** Unsolicited "prescreened" offers for credit and insurance must include a toll-free phone number you can call if you choose to remove your name and address from the lists these offers are based on. You may opt-out with the nationwide credit bureaus at 1-888-567-8688.
- **You may seek damages from violators.** If a consumer reporting agency, or, in some cases, a user of consumer reports or a furnisher of information to a consumer reporting agency violates the FCRA, you may be able to sue in state or federal court.
- **Identity theft victims and active duty military personnel have additional rights.** For more information, visit www.consumerfinance.gov/learnmore.

States may enforce the FCRA, and many states have their own consumer reporting laws. In some cases, you may have more rights under state law. For more information, contact your state or local consumer protection agency or your state Attorney General. For Information about your Federal rights contact:

TYPE OF BUSINESS:	CONTACT:
1. a. Banks, savings associations, and credit unions with total assets of over \$10 billion and their affiliates. b. Such affiliates that are not banks, savings associations, or credit unions also should list, in addition to the CFPB:	a. Consumer Financial Protection Bureau 1700 G Street NW Washington, DC 20552 b. Federal Trade Commission: Consumer Response Center – FCRA Washington, DC 20580 (877) 382-4357

**CONSUMER DISCLOSURE AND AUTHORIZATION REGARDING
BACKGROUND INVESTIGATION FOR EMPLOYMENT PURPOSES**

<p>2. To the extent not included in item 1 above:</p> <p>a. National banks, federal savings associations and federal branches and federal agencies of foreign banks</p> <p>b. State member banks, branches and agencies of foreign banks (other than federal branches, federal agencies and Insured State Branches of Foreign Banks), commercial lending companies owned or controlled by foreign banks, and organizations operating under section 25 or 25A of the Federal Reserve Act</p> <p>c. Nonmember Insured Banks, Insured State Branches of Foreign Banks, and insured state savings associations</p> <p>d. Federal Credit Unions</p>	<p>a. Office of the Comptroller of the Currency Customer Assistance Group 1301 McKinney Street, Suite 3450 Houston, TX 77010-9050</p> <p>b. Federal Reserve Consumer Help Center PO Box 1200 Minneapolis, MN 55480</p> <p>c. FDIC Consumer Response Center 1100 Walnut St., Box #11 Kansas City, MO 64106</p> <p>d. National Credit Union Administration Office of Consumer Protection (OCP) Division of Consumer Compliance and Outreach (DCCO) 1775 Duke Street</p>
<p>3. Air carriers</p>	<p>Asst. General Counsel for Aviation Enforcement & Proceedings Aviation Consumer Protection Division Department of Transportation 1200 New Jersey Avenue, S.E. Washington, DC 20590</p>
<p>4. Creditors Subject to Surface Transportation Board</p>	<p>Office of Proceedings, Surface Transportation Board</p>
	<p>Department of Transportation 395 E Street, S.W. Washington, DC 20423</p>
<p>5. Creditors Subject to Packers and Stockyards Act, 1921</p>	<p>Nearest Packers and Stockyards Administration area Supervisor</p>
<p>6. Small Business Investment Companies</p>	<p>Associate Deputy Administrator for Capital Access United States Small Business Administration 409 Third Street, SW, 8th Floor Washington, DC 20416</p>
<p>7. Brokers and Dealers</p>	<p>Securities and Exchange Commission 100 F Street, N.E. Washington, DC 20549</p>
<p>8. Federal Land Banks, Federal Land Bank Associations, Federal Intermediate Credit Banks and Production Credit Associations</p>	<p>Farm Credit Administration 1501 Farm Credit Drive McLean, VA 22102-5090</p>
<p>9. Retailers, Finance Companies, and All Other Creditors Not Listed Above</p>	<p>FTC Regional Office for region in which the creditor operates <u>or</u> Federal Trade Commission: Consumer Response Center - FCRA Washington, DC 20580 (877) 382-4357</p>



**CONSUMER DISCLOSURE AND AUTHORIZATION REGARDING
BACKGROUND INVESTIGATION FOR EMPLOYMENT PURPOSES**

Please complete, sign and return this form to SMU Human Resources by:

Fax: 214-768-2299

By e-mail: recruitu@smu.edu

In person: 6116 N. Central Expressway, 2nd floor, Suite 200. Dallas, TX 75206

Name of Department Contact: _____ Phone: _____

Department/School: _____

If you have questions, please contact the Department of Human Resources at 214-768-3311

PERSONAL DATA - Fill out the following information completely and accurately. Please print or type.				
(First Name)		(Middle Name)		(Last Name)
Other names you have ever used (Maiden, Adoption, etc.)				
(Current Address)		(City)	(State)	(Zip Code)
(Phone Number)		(E-mail address - may be used for official correspondence)		
If you haven't lived at your current address for the past 7 years, list the other addresses you've lived at during the past 7 years.				
(Address)	(City)	(State)	(Zip Code)	(Dates of Residence)
The following information is required by law enforcement agencies and other entities for positive identification purposes when checking public records. It is confidential and will not be used for any other purposes.				
(Social Security #)		(Date of Birth)		(Driver's License # and State)
If you've held a Driver's License in another state please list.				
(Driver's License # and State)			(Driver's License # and State)	
Education Details for Education Verification				
Please check the highest education level completed. Do not include degrees in progress.				
<input type="checkbox"/> HS Diploma or Equivalent <input type="checkbox"/> Associate Level Degree Major: _____				
<input type="checkbox"/> Bachelor's Level Degree Major: _____ <input type="checkbox"/> Master's Level Degree Major: _____				
<input type="checkbox"/> Doctorate, Specify degree: _____ <input type="checkbox"/> Other _____				
(Name of School)			(City)	(State)
(Name on Diploma/Degree at the time it was awarded)			(Graduation Date – Month/Year)	

HUMAN RESOURCES USE ONLY:

Home Base Org: _____ Department: _____

- Temporary Staff
 Adjunct Faculty
 Regular Staff
 Regular Faculty
 Volunteer/Non-Employee



**CONSUMER DISCLOSURE AND AUTHORIZATION REGARDING
BACKGROUND INVESTIGATION FOR EMPLOYMENT PURPOSES**

I acknowledge that I have received and carefully read and understand the separate "Disclosure and Authorization Regarding Background Investigation for Employment Purposes"; and the separate "Summary of Rights under the Fair Credit Reporting Act" that have been provided to me by Southern Methodist University.

By my signature below, I authorize the preparation of background reports about me, including background reports that are "investigative consumer reports" by HireRight, and to the furnishing of such background reports to Southern Methodist University and its designated representatives and agents, for the purpose of assisting Southern Methodist University in making a determination as to my eligibility for employment (including independent contractor or volunteer assignments, as applicable), promotion, retention or for other lawful employment purposes. I understand that if Southern Methodist hires me or contracts for my services, my consent will apply, and Southern Methodist University may, as allowed by law, obtain from HireRight (or from a consumer reporting agency other than HireRight) additional background reports pertaining to me, without asking for my authorization again, throughout my employment or contract period.

I understand that if Southern Methodist University obtains a credit report about me, then it will only do so where such information is substantially related to the duties and responsibilities of the position in which I am engaged or for which I am being evaluated.

I understand that information contained in my employment (or contractor or volunteer) application, or otherwise disclosed by me before or during my employment (or contract or volunteer assignment), if any, may be used for the purpose of obtaining and evaluating background reports on me. I also understand that nothing herein shall be construed as an offer of employment or contract for services.

I understand that the information included in the background reports may be obtained from private and public record sources, including without limitation and as appropriate: government agencies and courthouses; educational institutions; and employers. Accordingly, I hereby authorize all of the following, to disclose information about me to the consumer reporting agency and its agents: law enforcement and all other federal, state and local government agencies and courts; educational institutions (public or private); testing agencies; information service bureaus; credit bureaus and other consumer reporting agencies; other public and private record/data repositories; motor vehicle records agencies; my employers; the military; and all other individuals and sources with any information about or concerning me. The information that can be disclosed to the consumer reporting agency and its agents includes, but is not limited to, information concerning my: employment and earnings history; education, credit, motor vehicle and accident history; drug/alcohol testing results and history; criminal history; litigation history; military service; professional licenses, credentials and certifications; social security number verification; address and alias history; and other information.

By my signature below, I also promise that the personal information I provide with this form or otherwise in connection with my background investigation is true, accurate and complete, and I understand that dishonesty or material omission may disqualify me from consideration for employment. I agree that a copy of this document in faxed, photocopied or electronic (including electronically signed) form will be valid like the signed original.

Applicant Last Name _____ First _____ Middle _____

Applicant Signature _____ Date _____

Your Payroll Direct Deposit Information in *my*.SMU

To view/enter/update your direct deposit information, navigate to Self Service > Payroll and Compensation > Direct Deposit.

Your current banking information for payroll deposits will be displayed on the screen.

It is essential that you have accurate banking information to establish or update your direct deposit account record. Typically this information can be obtained by

- a. Contacting a customer service number for your financial institution
- b. Visiting a local bank branch or office, or
- c. Viewing your account information online within your bank's Web portal.

Direct deposit changes will be reflected on your next paycheck processed by SMU, as feasible – so, update your account information as soon as you know a change is needed.

- A general guideline (to ensure your changes are reflected on your next paycheck) is to have your direct deposit information updated in my.SMU by the "TIMEaccess & Elec.Extra Comp Approval Date" indicated on the [Payroll Processing Schedule](#) for the specific pay date.
- If a paycheck for you is being processed at the time you submit your changes, your changes may not be reflected until the following paycheck.

To **add** account information:

- Click the "Add Account" button.
- Complete all required fields of data on the page (indicated with a * next to the field name).
 - Use the [View check example](#) link on the page to understand the essential bank account information used for direct deposit transactions (Routing Number and Account Number).
 - ➔ Do not enter your debit card number as your account number!
 - "Amount or Percentage" is the only optional field on the page, to be completed if you are setting up an account to which you are allocating a specific amount or percentage from your net pay.
- For Account Type, choose "Checking" or "Savings."
- For Deposit Type, designate one account to be the "Balance of Net Pay" type of account.
 - If you are only using one account for your Payroll direct deposit, it should be designated as your "Balance of Net Pay" account.
 - If you are also allocating part of your net pay to another checking or savings account, the "Balance of Net Pay" account is the one to which the *rest* of your paycheck is deposited after you send a specified amount of money to a savings account, etc.
- Use the Amount or Percent field to allocate a portion of your net pay into an account with a Deposit Type of "Amount" or "Percentage."
- The value you indicate in the Deposit Order field will determine the order in which your net pay is allocated between multiple deposit accounts.
 - If you want to allocate your net pay between multiple accounts, assign the Deposit Order value in the order you want the accounts used for your deposit.
 - The account you designate as "1" will be the first to receive the designated amount or percentage.
 - The account you designate as "2" will be the second to receive the designated amount or percentage, etc.
 - Your "Balance of Net Pay" account will be assigned the Priority Value of '999' (the highest Deposit Order value) so that all other allocations are processed before that one.

- Click “Submit” at the bottom of the page to save the new account information. (A small ‘Saved’ image will display briefly in the upper right corner of your screen.)
- Click “Return to Direct Deposit” to view all of your updated account information.

To **change** existing account information:

- Click “Edit” button on the row to be updated. A new page will open with the fields populated with your current information.
- Update the field(s) as needed. Refer to account details provided by your financial institution to ensure the information you submit is valid.
 - Use the [View check example](#) link on the page to understand the essential bank account information used for direct deposit transactions (Routing Number and Account Number).
- To cancel any changes you’ve made on the page, click “Return to Direct Deposit” link at the bottom of the page *before clicking Submit*.
- Click “Submit” at the bottom of the page to save the new account information. (A small ‘Saved’ image will display briefly in the upper right corner of your screen.)
- Click “Return to Direct Deposit” to view all of your updated account information.

To **delete** existing account information:

- Click the “Delete” button on the row to be deleted.
- On the Delete Confirmation page, click “Yes” or “No” to complete the transaction.
- On the Submit Confirmation page, click “OK” to return to the Direct Deposit page.
- Review your updated direct deposit information to ensure that the correct account was deleted.

Note about deleting accounts:

The order in which you make changes matters! Be sure to add a new account before deleting the last row of existing account information. If you delete all of your accounts with the intention of then adding new account information, you will be required to wait until a later date to make changes to your direct deposit record. (See additional information below in *Submitting multiple changes*.)

Submitting multiple changes:

Direct deposit changes are limited to one self-service transaction per day. You can add or edit information for multiple direct deposit accounts in a single self-service transaction, but once you save the changes and exit the Direct Deposit page, you cannot make additional changes on the same day. If you attempt to make additional changes, a message appears from the Direct Deposit page saying that multiple direct deposit changes are not allowed on the same day.

Be sure to review all of your updated information *before* you navigate off the Direct Deposit page in Self Service.

If you submit direct deposit information and realize that you need to make additional changes *after* you leave the Direct Deposit page in Self Service, you will need to return to my.SMU on the following day to submit the new or changed information.

For additional assistance, please contact the Payroll Help Desk (payroll@smu.edu or 214-768-2073).

Your W-4 Elections in *my.SMU*

Go to <https://my.smu.edu/> and log in with your user name (SMU ID#) and password. You can make W-4 elections online via the Self Service area of my.SMU.edu under Payroll and Compensation. Please note that job data must be entered before you can make these elections. Check with your department to ensure that a Payroll Authorization Form (PAF) was submitted and that job data has been entered for your new job.

Please refer to our [Payroll Taxes](#) page for additional information, as well as [IRS instructions and worksheet](#) for properly completing the Form W-4. (Instructions are located at the top of the 1st page; the worksheet is on the 2nd page.)

Please note that the new information will be submitted immediately, but may not be reflected on the next paycheck if we are in the middle of processing a payroll.

Log in to my.SMU, go to Main Menu>Self Service>Payroll and Compensation>W-4 Tax Information

The screenshot shows the my.SMU website interface. The breadcrumb trail is: Favorites > Main Menu > Self Service > Payroll and Compensation. The page title is "Payroll and Compensation". Below the title, there is a navigation bar with links: "View Paycheck", "View W-2/W-2c Forms", "W-2/W-2c Consent", "Direct Deposit", and "W-4 Tax Information".

The screenshot shows the "W-4 Tax Information" page on my.SMU. The breadcrumb trail is: Favorites > Main Menu > Self Service > Payroll and Compensation > W-4 Tax Information. The page title is "W-4 Tax Information". Below the title, there is a "Social Security Number" field. The page contains several sections: "Home Address", "Mailing Address", "W-4 Tax Data" (with fields for "Enter total number of Allowances you are claiming" and "Enter Additional Amount, if any, you want withheld from each paycheck"), "Indicate Marital Status" (with radio buttons for "Single" and "Married"), "Check here and select Single status if married but withholding at single rate.", "Check here if your last name differs from that shown on your social security card.", "Claim Exemption" (with a dropdown for the year "2015" and a checkbox for "I claim exemption from withholding for the year 2015 and I certify that I meet BOTH of the following conditions for exemption"), "Exemption Conditions" (with text about refund of ALL Federal income tax withheld), and "Check this box if you meet both conditions to claim exempt status." At the bottom, there is a declaration: "Under penalties of perjury, I declare that I have examined this certificate and to the best of my knowledge and belief, the information furnished is true and correct." A back arrow is visible at the bottom left.



New for the 2018-19 academic year! You can order your new Adjunct Faculty semester permits online.

Here are some simple steps to order your permit online and have it mailed to you.

1. Log on to “ My Parking Account” on the Parking and ID card Service website
As long as you are show current Adjunct employee status you may log on to your parking account on the Parking and ID Card Services website using your SMU ID number and password. This is the same log in and password as you use for my.SMU.edu or other systems on campus. Go to www.smu.edu/parkingservices or use the QR code below.
2. Select “Get Permit”
3. On the permit selection screen. Select the appropriate permit for semester you will be teaching with the number of courses. Permits are available a couple of months in advance of each new term.
4. Enter or confirm your vehicle information, email and mailing address. You will receive an order confirmation by email and your permit will be mailed directly to your mailing address.
5. Complete the order using a debit or credit card and print the temporary permit by clicking on the hyperlink marked “Print Temporary Permit Now” on the last screen of the online order system before you logging. You will use this temporary permit while your order is being processed and mailed. You should receive the permit in approximately 5-10 business days via US mail.
6. The adjunct permits are available 1 month in advance of the semester start.
7. If you are not seeing adjunct permit options, it may be your parking account has not updated yet. Please contact us via email at parking@SMU.edu with your ID number and we will check and update if needed.

Please contact the Parking and ID Card Services at parking@smu.edu or (214)768-7275 OR (214) SMU-PARK for additional information or assistance.

Alternatives to parking on campus include; DART, DART Rideshare and VanPool program, SMU Express and ZipCar.

