

**Kansas State University  
College of Veterinary Medicine**

**GRADUATE STUDENT EMPLOYEE  
PAYROLL INFORMATION**

<b>Employee's Supervisor Must Complete:</b>	
Appointment Period	_____
Pay Rate:	_____
FTE:	_____
Account/Project Number	_____
Will employee work with animals?	___ No ___ Yes
Supervisor Signature	_____

Contact Erin Wilson (785-532-4015; [elwilson@vet.k-state.edu](mailto:elwilson@vet.k-state.edu)) or Jaci Begnoche ([jbegnoche@vet.k-state.edu](mailto:jbegnoche@vet.k-state.edu)) to schedule a time to complete your payroll appointment forms. You will need to provide personal documentation for verification of employment eligibility, your social security card for payroll purposes, and a blank check for direct deposit of your paycheck.

**Name** \_\_\_\_\_ **Social Security Number** \_\_\_\_\_

**KSU E-Mail Address** \_\_\_\_\_ **Wildcat ID Number (WID)** \_\_\_\_\_

**Are you a College of Veterinary Medicine student?** \_\_\_ NO \_\_\_ YES

**Have you ever worked for KSU or the State of Kansas before?** \_\_\_ NO \_\_\_ YES

If yes, where and when \_\_\_\_\_

**Marital Status:**

Single    Married    Divorced    Widowed    Separated    Head of Household    Common-law

<p><b>Local Mailing Address:</b></p> <p>Address _____</p> <p>City, State, ZIP _____</p> <p>County Abbreviation _____</p>	<p><b>Permanent Address if different:</b></p> <p>Address _____</p> <p>City, State, ZIP _____</p> <p>County Abbreviation _____</p>
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**Phone Numbers:** Home \_\_\_\_\_ Other Phone \_\_\_\_\_

**In case of emergency,** contact (name, phone number and relationship) \_\_\_\_\_

**Gender:**            Male            Female

**Highest level of education:**

High School Graduate/GED            Technical School            Some College            Some Grad School  
 2 year College Degree            Bachelor's Degree            Master's Degree            Doctorate            Post-Doctorate

**Date of Birth** (MM/DD/YY): \_\_\_\_\_

**Ethnic Group:**            American Indian/Alaskan Native            Asian            Black/African American  
    Hispanic/Latino            Native Hawaiian/Oth Pac Island            White

**Military Status:**            No Military Svc            Active Reserve            Inactive Reserve            Vietnam Vet  
    Other Veteran            Retired

**Citizenship Status:**            Native            Naturalized            Alien Permanent            Alien Temporary

If you are not a U.S. citizen, please provide:

VISA Type \_\_\_\_\_ Issue Date \_\_\_\_\_ Expiration Date \_\_\_\_\_ Arrival date in U.S.: \_\_\_\_\_