



LaGuardia Community College

31-10 Thomson Avenue - Long Island City, New York 11101. Telephone (718) 482-7200

Full-Time Faculty and College Lab Tech Appointment Checklist

NAME: _____ TITLE: _____

DIVISION: _____ DEPARTMENT: _____

Please attach the following items to this checklist upon submission to the Human Resources Office E-408.

- | | HR Only |
|--|--------------------------|
| 1) CUNY Employment Application (Part I II III) | <input type="checkbox"/> |
| 2) Curriculum Vitae or Resume | <input type="checkbox"/> |
| 3) (P) Verify Social Security Card (Copy attached) | <input type="checkbox"/> |
| 4) (P) Residency Status for Tax Purpose Data Request Form | <input type="checkbox"/> |
| 5) (P) Personal Data Form | <input type="checkbox"/> |
| Emergency Contact Information | <input type="checkbox"/> |
| (P) Statement of Citizenship | <input type="checkbox"/> |
| (P) Voluntary Self-Identification Form for Employees | <input type="checkbox"/> |
| (P) Veteran's Form | <input type="checkbox"/> |
| 6) I-9 Employment Eligibility Verification | <input type="checkbox"/> |
| Non-Resident Alien <input type="checkbox"/> Yes <input type="checkbox"/> No (If yes, process in Glacier) | |
| 7) Voluntary Self-Identification of Disability | <input type="checkbox"/> |
| 8) (P) Federal Tax Form W-4 (Signature required) | <input type="checkbox"/> |
| 9) (P) State Tax Form NYSIT-2104 (Signature required) | <input type="checkbox"/> |
| 10) (E) Direct Deposit Authorization Agreement | <input type="checkbox"/> |
| 11) New Employee On-Boarding Orientation for IT Security | <input type="checkbox"/> |
| 12) Amended Constitutional Oath | <input type="checkbox"/> |
| 13) CUNY Employment Policies Checklist | <input type="checkbox"/> |
| 14) (E) Issuance of ID Memo | <input type="checkbox"/> |

HR Actions

(P) Send Copy to Payroll

(E) Give to Employee

In addition to the above documents, please supply the Human Resources Office with the following items:

- 1) An Official Sealed Transcript* and Highest Degree Graduate Undergraduate
- 2) For Nursing Faculty: Copy of NYS License

**Foreign Degrees: Individuals who have degrees from outside the United States must have it evaluated by an accredited evaluation agency. Agencies recommended are the World Evaluation Services, 212-966-6311, (www.wes.org), and the Globe Language Services, 212-227-1994, (www.globelanguage.com). The evaluation will be reviewed by this department to determine whether it meets the requirements of the title.*

- 3) Three (3) Written Professional References

HUMAN RESOURCES DEPARTMENT USE ONLY

Processed by: _____

Date Received: _____