

Non-Tax Levy Payroll Appointment/Reappointment Letter (Not to be used for Teaching Appointments)

Account Number:				
Address:				
City	State	Zip Code	Position Title:	
Dear		:		
The rate of compensation the appointment period upon number of hours of Labor Standards Act, in among other things, that hourly rate for any hour are not covered by certa Employee, you will not approval from Sharon Mevery Non-Tax Levy E College at any time. No into any employment as	Payroll beg on is \$ The worked as su this position at you are en rs you work ain FLSA pr be permitte Neill, Assista Employee is a o supervisor greement tha	per hour. The made compensation valuabilities on the abon, you are considerable to overtime in excess of 40 horovisions, including the work in excess ant Vice Presideran employee-at-valuation of the representation would be contracted to work in excess of the presiderant would be contracted to work in excess of the presiderant would be contracted to the presideration of the presiderati	Reappointment/Appointment Re_and ending not later than aximum total number of hours you will be paid bi-weekly. Compentendance report and time sheet. Hered to be a Non-Exempt Employer and the hourly rate equal to hour per week) and Exempt Employer week without for Budget & Finance. Will. Such employee may be territative of Hunter College has the rary to this employment-at-will pany associated Hunter College parts.	ou may work during station will be based Under the U.S. Fair ployee (meaning, 1.5x your regular ployee (meaning you ou are a Non-Exempt t obtaining advance minated by Hunter e authority to enterpolicy. Employment
Please complete the fol original for verification	lowing form) to Human	ns and submit wit Resources. *	h a copy of your Social Security	Card (or present
Form W-4 – IR Form IT-2104 -	S Employe – New York	e's Withholding State Employee) Employment Eligibility Verificate Allowance Certificate 's Withholding Allowance Certenroll in direct deposit.	
	ommendation	n will become ef	mit a copy of your Visa and an uffective only upon signature of al	
Authorized Signatory o	f Account		Employee Signature	Date
			Employee SSN	