

# Graduate Assistant New Hire Checklist

Office of Human Resources  
The Graduate Center

Name: \_\_\_\_\_ Title: \_\_\_\_\_

Date of New Hire Orientation: \_\_\_\_\_ Home Telephone: \_\_\_\_\_

**ORIENTATION DOCUMENTS:** Please bring the completed forms with you to the orientation.

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| <input type="checkbox"/> Employment Eligibility Verification - Form I-9 | <input type="checkbox"/> Workload Reporting Form  |
| <input type="checkbox"/> W-4 (Federal Tax Withholding)                  | <input type="checkbox"/> Fact Sheet   |
| <input type="checkbox"/> IT-2104 (State Tax Withholding)                | <input type="checkbox"/> New Health Insurance Marketplace Coverage options and your Health Coverage |
| <input type="checkbox"/> Direct Deposit                                 | <input type="checkbox"/> Union Membership and Agency Shop Fee Deductions                            |
| <input type="checkbox"/> Personnel Data Survey                          | <input type="checkbox"/> Commuter Benefits Program Enrollment Form (Wage Works)                     |
| <input type="checkbox"/> Emergency Contact Information                  | <input type="checkbox"/> <a href="#">CUNY Information Page (Click here for more information)</a>    |
| <input type="checkbox"/> Release of Information                         |   |
| <input type="checkbox"/> Amended Constitutional Oath Upon Appointment   |   |

**POLICIES & INFORMATION:** Employees are responsible for knowing all CUNY and The Graduate Center Policies. Please review each as part of your appointment.

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| <ul style="list-style-type: none"><li>• <a href="#">Agency Shop Fee</a></li><li>• <a href="#">Charge of Discrimination Form</a></li><li>• <a href="#">CUNY Policy on Computer Use</a></li><li>• <a href="#">Domestic Violence</a></li><li>• <a href="#">Employee Notice of Work Related Injury or Illness Form</a></li><li>• <a href="#">Equal Opportunity Employment Program</a></li><li>• <a href="#">Fire Safety and Emergency Evacuations</a></li><li>• <a href="#">Hiring and Retention of Individuals with Disabilities</a></li><li>• <a href="#">Jury Duty</a></li><li>• <a href="#">Notice of Non-Discrimination</a></li><li>• <a href="#">Office of Compliance &amp; Diversity</a></li><li>• <a href="#">Ombuds Office</a></li></ul> | <ul style="list-style-type: none"><li>• <a href="#">Patient Protection and Affordable Care Act</a></li><li>• <a href="#">Report of Injury</a></li><li>• <a href="#">Security Policies and Crime Reporting Procedures</a></li><li>• <a href="#">Sexual Misconduct</a></li><li>• <a href="#">Snow Emergency Closing Procedures</a></li><li>• <a href="#">Title IX Awareness</a></li><li>• <a href="#">Tobacco Free CUNY</a></li><li>• <a href="#">Veterans and Veterans of the Vietnam Era with a Disability</a></li><li>• <a href="#">Workplace Violence Policies, Procedures and Prevention Plans</a></li><li>• <a href="#">You Have a Right to Know</a></li></ul> |
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**EMPLOYEE TRAINING:** Please complete the following **mandatory** CUNY training programs. They may be taken online at any time but must be completed before your appointment begins:

- [IT Security Awareness Policy](#)
- Title IX Training:
  - [Policy Highlights](#)
  - [Get Involved](#)
  - [Consent](#)

I have received the links to the policies and employee training programs governing my appointment.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_