

**UtahStateUniversity**  
COLLEGE OF EASTERN UTAH

Hourly EPAF Form

Name: \_\_\_\_\_ A# \_\_\_\_\_

Gender: Male  Female  Ethnicity: Hispanic or Latino  Not Hispanic or Latino

Birthdate: \_\_\_\_\_ Race: \_\_\_\_\_

American Indian/Alaska Native  Asian  Black  Native Hawaiian/Pacific Islander  White

Are you a native born, naturalized, or natural born US Citizen? Yes  No

Local Address: \_\_\_\_\_

Permanent Address: \_\_\_\_\_

Hourly Pay Rate: \_\_\_\_\_ Effective Date: \_\_\_\_\_

Department: \_\_\_\_\_ Index Number: \_\_\_\_\_

Number of hours to work each week: \_\_\_\_\_ Job Title: \_\_\_\_\_

Brief Job Description: \_\_\_\_\_

Department code: \_\_\_\_\_ Supervisor: \_\_\_\_\_

EPAF Requestor: \_\_\_\_\_ Date: \_\_\_\_\_

**Additional Forms Required:** (please check off completed items)

I-9  Memorandum of Agreement  W-4  Direct Deposit Notification

**STUDENTS ONLY:**

Supervisor: \_\_\_\_\_ Date: \_\_\_\_\_

Financial Aid: \_\_\_\_\_ Date: \_\_\_\_\_

Student Worker: Yes  No  Credit hours: \_\_\_\_\_ Semester: Fall  Spring  Summer

Work Study Limits: \_\_\_\_\_  
FEDERAL INSTITUTIONAL

**PAYROLL USE ONLY**

\_\_\_\_\_  
EPAF Type Position Date Trans # I-9 Date