



Graduate Assistant (GA) Procedures:

1. If a candidate has not been identified, complete the template (attached) for posting the position. Human Resources (HR) will post the position. Candidates will send their resumes directly to the supervisor.
 2. Once an individual has been identified, complete the Graduate Assistant Position Approval Form (attached).
 3. Have the candidate complete the Employment Application and sign the Authorization for Background Check (forms attached). Attach these two completed forms to the Position Approval Form.
 4. Attach Graduate Assistant candidate's resume to Position Approval Form.
 5. Attach the position description, which will be enclosed with the GA's appointment letter, to the Position Approval Form. (Sample position description attached.)
 6. Once all signatures have been received on the Position Approval Form, a letter confirming the appointment is sent to the Graduate Assistant by the **appropriate Vice President**. (Attached is sample letter for informational purposes only.)
-

In summary:

Candidate not yet identified, complete template for posting position and forward to HR.

Candidate identified, complete Graduate Assistant Position Approval Form and attach the following:

1. Employment Application
 2. Signed Authorization for Background Check
 3. Candidate's Resume
 4. Position Description
-

Contact Human Resources at 880-2269 or 880-2265 with any questions.

Template for Graduate Assistant Ad

Graduate Assistant for (Department)

The Department of (name of department) at Medaille College seeks a Graduate Assistant for the (date) academic year.

The GA will be responsible for (include duties and responsibilities). For questions regarding the position, contact (name) at (e-mail address).

Medaille is a growing, private, four-year, liberal arts-based college in Buffalo, New York, serving the educational needs of traditional and non-traditional students in Western New York and Southern Ontario through a variety of undergraduate and graduate programs (www.medaille.edu).

Resumes should be electronically submitted to (your name and e-mail address, phone number optional), Medaille College.

**Medaille College
Graduate Assistant (GA) Position Approval Form**

Please note: This form must include all information in order to prepare the appointment letter.

GA's Name _____

Address _____

Start Date _____ **End Date** _____

Compensation \$ _____

Reports To _____

Department _____

Budget No. _____

In Budget Yes ☐ No ☐ If no, provide justification below

Justification (if not in budget)

Required Approvals:

Print or Type Name

Signature

Supervisor

Supervisor

Date

Department Chair (if applicable)

Department Chair (if applicable)

Date

Vice President

Janel M. Curry, Ph.D.

Vice President

Date

Director of Human Resources

Barbara J. Bilotta

Director of Human Resources

Date

VP for Business and Finance

Lori Miterko

VP for Business and Finance

Date

cc: Payroll



Medaille College is strongly committed to a policy of providing equal employment opportunities to all employees and applicants without regard to the following: age, sex, race, color, sexual orientation, religion, national origin, disability, marital status, veteran status, military status, or any other category protected by law. The College also is committed to the practice of reasonable accommodation for qualified persons with disabilities as required by the Americans with Disabilities Act.

EMPLOYMENT APPLICATION

Medaille College
18 Agassiz Circle
Buffalo, NY 14214
716-880-2000

PERSONAL INFORMATION

Position(s) applied for				Date of application	
Name	First	Middle	Last	Former Name(s)	
Present Address	Street		City	State	Zip
Permanent Address (if different from above)	Street		City	State	Zip
Social Security Number		Present Telephone Number		Alternate Telephone Number	
Are you 18 or older? YES <input type="checkbox"/> NO <input type="checkbox"/>					
Only U.S. citizens or aliens who have a legal right to work in the U.S. are eligible for employment. Can you, upon employment provide genuine documentation establishing your identity and eligibility to be legally employed in the United States? YES <input type="checkbox"/> NO <input type="checkbox"/>					
Have you ever filed an application with Medaille College before? YES <input type="checkbox"/> NO <input type="checkbox"/> If yes, give date: _____					
Have you ever been employed at Medaille College before? YES <input type="checkbox"/> NO <input type="checkbox"/> If yes, give date: _____					
Do you have any restrictions or obligations that would prevent you from working overtime? YES <input type="checkbox"/> NO <input type="checkbox"/>					
Do you have any restrictions or obligations that would prevent you from working consistently or arriving to work on time? YES <input type="checkbox"/> NO <input type="checkbox"/>					
When are you available to begin work? _____ Are you available for: Full Time <input type="checkbox"/> Part Time <input type="checkbox"/> Shift Work <input type="checkbox"/> Temporary <input type="checkbox"/>					
Can you travel if the job requires it? YES <input type="checkbox"/> NO <input type="checkbox"/> If yes, are there limitations? Explain: _____					
Have you been convicted of a crime? (Conviction will not necessarily disqualify an applicant from employment.) YES <input type="checkbox"/> NO <input type="checkbox"/>					
If yes, please list dates of offenses and dispositions. _____					
How did you become aware of this position? Buffalo News <input type="checkbox"/> monster.com <input type="checkbox"/> LinkedIn <input type="checkbox"/> HigherEdJobs <input type="checkbox"/> Diverse Jobs <input type="checkbox"/> Chronicle of Higher Education <input type="checkbox"/> Indeed.com <input type="checkbox"/> other <input type="checkbox"/> _____					

Applicant's Statement

I certify that answers given herein are true and complete to the best of my knowledge. In the event of employment, I understand that false or misleading information given in my application or interview(s) may result in withdrawal of an offer of employment, or if subsequent to employment, may result in dismissal.

I understand this employment application is not be construed as a guarantee of employment. I further understand that, should I become employed, my employment with the organization does not constitute any form of contract, implied or expressed, and such employment may be terminated at will either by myself or my employer upon notice of one party to the other.

I authorize investigation of all statements contained in this application for employment as may be necessary in arriving at an employment decision. You may use this authority to check references with former employers I have listed, unless otherwise indicated, as well as the personal references listed.

Your signature below indicates full understanding and agreement with the statements above.

Signature of Applicant	Date
------------------------	------

Disclosure and Authorization for Consumer and/or Investigative Reports

In connection with my application for employment (including contract or volunteer services) or application to rent a dwelling with _____ ("Company"), I understand that consumer reports will be requested by you ("Company"). I understand that upon my authorization I may be subject to a consumer report, which may include information including but not limited to: names and dates of previous employers reason for termination of employment, work experience reasons for termination of tenancy former landlords, education, accidents, licensure, credit etc I further understand that such reports may contain public information such as, but not limited to, my driving record, workers' compensation claims, judgments, bankruptcy proceedings, evictions criminal records, etc, from federal, state, and other agencies that maintain such records Credit history will only be requested where such information is substantially related to the duties and responsibilities of the position for which you are applying

You have the right, upon written request made within a reasonable period of time after receipt of this notice to request whether a consumer report has been conducted about you, disclosure of the nature and scope of any investigative consumer report, and to request a copy of your report The scope of this notice and authorization is all-encompassing, however, allowing the Company to obtain consumer and/or investigative reports now and throughout the course of your employment to the extent permitted by law, unless you otherwise revoke your consent by providing written notification to Company As a result you should carefully consider whether to exercise your right to request disclosure of the nature and scope of any investigative consumer report

The consumer and/or investigative consumer report(s) will be obtained from:
Metrodata Services, Inc., 403 Main St. Ste. 624, Buffalo, NY 14203, (716) 847-1590
Metrodata Services' information and privacy policy can be found at www.metro-check.com

California applicants or employees only: By signing below you also acknowledge receipt of A SUMMARY OF YOUR RIGHTS UNDER THE PROVISIONS OF CALIFORNIA CIVIL CODE 1786.22
Please check the appropriate box below if you would like to receive a copy of your investigative consumer credit report at no charge.
Minnesota and Oklahoma applicants or employees only: Please check the appropriate box below if you would like to receive a copy of your consumer report free of charge
New York and Maine applicants or employees only: You have the right to inspect and receive a copy of any investigative consumer report requested by Company by contacting consumer reporting agency identified above directly. You may also contact the Company to request the name address and telephone number of the nearest unit of the consumer reporting agency designated to handle inquiries which the Company shall provide within 5 days.
New York applicants or employees only: Upon request you will be informed whether or not a consumer report was requested by Company, and if such report was requested, informed of the name and address of the consumer reporting agency that furnished the report. By signing the authorization, you also acknowledge receipt of Article 23-A of the New York Correction Law.
Oregon applicants or employees only: Information describing your rights under federal and Oregon law regarding consumer identity theft protection, the storage and disposal of your credit information and remedies available should you suspect or find that the Company has not maintained such records is available to you upon request.
Washington State applicants or employees only: You also have the right to request from the consumer reporting agency a written summary of your rights and remedies under the Washington Fair Credit Reporting Act.

Acknowledgment and Authorization for Background Check

I acknowledge receipt of the *Disclosure Regarding Consumer and/or Investigative Report* and *A Summary of Your Rights Under The Fair Credit Reporting Act*, and certify that I have read and understand both of those documents. I hereby authorize the obtaining of "consumer reports" and/or "investigative consumer reports" by the Company at any time after receipt of this authorization and throughout my employment, if applicable. To this end I hereby authorize, without reservation, any law enforcement agency, administrator, local, state or federal agency, institution, school or university (public or private), information service bureau, or insurance company to furnish any and all background information requested by Metrodata Services, Inc. 403 Main St. Ste. 624 Buffalo NY 14203. (716) 847-1590, www.metro-check.com, another outside organization acting on behalf of the Company and/or the Company itself

I understand that by signing my name below that I am signing the Authorization form directing the background check as described above, and I certify that:

- I have received the Disclosure Regarding Consumer and/or Investigative Report, have read and received the Summary of Your Rights and if a California resident/applicant, the A Summary of Your Rights Under the Provisions of California Civil Code 1786.22
- I understand that my signature now and throughout this process will be binding. Additionally, notices, documents, and communications may be provided electronically and will meet the requirements set forth under Federal and/or State law, as permitted by law. I agree that a facsimile ("fax"), electronic or printout of this authorization may be accepted with the same authority as the original.

☐ For California, Oklahoma, or Minnesota employees and applicants please check here to indicate that you would like to receive a copy of your consumer report free of charge.

Print Name: _____

Other Names Known By (AKA): _____

Social Security Number: _____ - _____ - _____ Date of Birth: ____/____/____

Driver's License Number: _____

Current Address: _____

City: _____ State: _____ Zip: _____

Applicant Signature: _____ Date: _____

Prospective Employer: _____



This is a SAMPLE – tailor the information to the needs of your department

POSITION DESCRIPTION

TITLE:	Graduate Assistant of Student Involvement
REPORT TO:	Director of Student Involvement and Multicultural Education & Diversity
COMPENSATION:	\$9,000
QUALIFICATIONS:	Bachelors degree required. Experience in student activities, programming, and clubs preferred. Enrolled in a graduate program leading to student affairs work/teaching in higher education.
DESCRIPTION:	A full-time graduate assistantship supporting the enhancement of the Student Involvement Center; including but not limited to student activities and programming, clubs and organizations. Serve a minimum of 20-25 hours a week; flexible schedule a <i>must</i> .
TERMS:	August 16, 2020 to June 15, 2021, full-time status and expectations, <u>evenings/weekend</u> hours included.

DUTIES AND RESPONSIBILITIES

- Create and implement a needs assessment / demographic assessment of our students
- Maintain weekly Stall Street Journal and other advertisements
- Design, create, and implement a late night programming series for students once a month
- Assist in planning traditional educational programming to promote diversity awareness on campus
- Assist the Director of Student Involvement in the planning, organization of the Leadership/co-curricular Grant program.
- Work with the Director of Student Involvement in facilitating the True, Blue and Gold which includes but not limited to:
 - Coordinating workshops for True, Blue and Gold program
 - Coordinating Community Service projects
 - Coordinating the annual True, Blue and Gold Awards Banquet
- Serve as a member of the Student Affairs Division by attending meetings and participating in overall planning for the division; serve on committees as assigned
- Represent the College at Small College Consortium meetings and other professional development opportunities as approved
- Assist in planning a welcome reception in fall/spring for students, to assist in facilitating new admits with faculty/administration on campus
- Perform additional duties as assigned

To be completed and mailed by the VP's Administrative Assistant

Date

Name

Address

City, State, Zip Code

Dear insert name:

I am pleased to confirm your appointment to a Graduate Assistantship with the insert department's name at Medaille College for the insert year (e.g., 2020-2021) academic year. Your appointment will be from insert start date to insert end date. Your compensation will be \$insert amount, payable semi-monthly.

You will be responsible for all the duties delineated in the enclosed Position Description and report to insert supervisor's name and title. The College places confidence and trust in the integrity and character of its staff and expects that all members will conduct themselves in a professional manner in keeping with the high personal, moral, and intellectual standards of the College. Please note that your employment is at-will (refer to *Medaille College Policy Manual V*, Subsection 5.1.1.1) and you are expected to abide by the rules and policies of the College.

You must contact Debra Persutti, 716-880-2270, debra.a.persutti@medaille.edu, or Stefanie Adams, 716-880-2269, hfinance@medaille.edu, in the Human Resources Office to confirm/update your personnel information. If you are a first-time Medaille employee, you **must** complete and submit a hard copy of the Employee Banner Access Form, State and Federal tax forms and an I-9 Eligibility form. Identification needed for the I-9 form is a passport OR driver's license and social security card OR driver's license and birth certificate. Please contact Human Resources as soon as possible to complete the necessary paperwork.

We are looking forward to your presence on campus and working with you in the months ahead.

Sincerely,

Vice President's Name

Vice President's Title

XXX/xxx

Enclosure

cc: Barbara Bilotta, Director of Human Resources
Mark Taylor, Payroll Manager
insert supervisor's name and title
insert department chair/supervisor's name and title
Budget No. insert budget no.