

## Human Resources Department

70 Sip Avenue  
3rd Floor  
Jersey City, NJ 07306  
201-360-4070  
hr@hccc.edu



### ID FORM: Bring the completed form and a Photo-ID to Safety & Security (81 Sip Avenue)

New Hire

Rehire/Card Replacement

LAST NAME: \_\_\_\_\_ FIRST NAME: \_\_\_\_\_

DEPARTMENT: \_\_\_\_\_ STARTING DATE (if applicable): \_\_\_\_\_

TITLE: \_\_\_\_\_

SUPERVISOR: \_\_\_\_\_

*I understand that during my employment with Hudson County Community College I may have access to confidential student information. I understand that student privacy rights and records are protected by the Family Education Rights and Privacy Act (FERPA). Disclosure of student information to unauthorized parties violates FERPA and college policy. I may not attempt to access student information unless I have legitimate educational interest. I may access only the information needed to complete my assigned or authorized task. I will not release any student information unless authorized to do so.*

*I also understand that the college may monitor my use of the student information system.*

EMPLOYEE SIGNATURE: \_\_\_\_\_

#### **HUMAN RESOURCES USE ONLY:**

H.R. Paperwork (if applicable):

- \_\_\_\_\_
- Resume
  - Official transcript
  - Social security card (for payroll)
  - Proper identification

EMPLOYEE ID NUMBER: \_\_\_\_\_ DATE: \_\_\_\_\_

HUMAN RESOURCES SIGNATURE: \_\_\_\_\_