THE CITY UNIVERSITY OF NEW YORK

Important Notice to Applicants

Non Discrimination

It is the policy of the City University of New York (CUNY) and its constituent colleges and units to recruit, employ, retain, promote, and provide benefits to employees and to admit and provide services for students, without regard to race, color, national or ethnic origin, religion, age, sex, sexual orientation, gender identity, marital status, disability, genetic predisposition or carrier status, alienage, citizenship, military or veteran status, or status as victim of domestic violence.

Disability Accommodation Available for Applicants

If you require an accommodation for a disability in order to participate in the selection process, please contact the Human Resources Director.

Offer of Employment

Any offer of employment is contingent upon successful completion of CUNY's <u>total</u> employment screening process, including receipt of references that the University and/or College considers satisfactory. Official representations are solely those made in writing prior to appointment by the University/College executive or manager authorized to make appointments for his/her respective division and area of responsibility.

Post Offer Pre-Employment Medical Examination. Drug Screen, and Physical Fitness Assessment

For <u>some</u> positions, the hiring department may require a medical examination, drug test, and/or physical fitness assessment as a condition of employment, only if it is relevant to the job. If such is required, it will be stated in the Position Vacancy Announcement or Job Specification.

Employment Eligibility and Identity Documents Verification

Under *The Immigration and Reform Control Act of 1986*, we are required to verify your employment eligibility and identity within three (3) days of your reporting to work.

If you are claiming preference for military service, you will be required to submit an original *DD214* along with verification of your disciplinary record.

Reference and Background Checking

Current and former employers may be contacted for verification of any and all information stated in this application and or during any phase of the selection process. In order for CUNY to obtain this information, you will be asked to sign an *Authorization to Release Reference Information* form agreeing to hold any and all of your reference sources harmless and free of any liability for releasing information CUNY deems relevant to determining whether to employ you. For some positions a criminal background check may be required as part of the employment process. Applicants for these positions will be required to complete a personal disclosure and release form before this information may be obtained.



THE CITY UNIVERSITY OF NEW YORK APPLICATION FOR EMPLOYMENT

Position Sought:

Full Time:_____Part Time:_

	If part time,	hours available:		
COLLEG	E			ampm
(PRINT) Name			Payroll Title	:
Last	First	Middle	Position Vac	ancy Number:
If known by another name	please give that name			uney rumber.
Home Address				
No.	Street	Apt # City	State	Zip
Telephone Number ()		()_		
Email Address	Home		Day Time	
Specification with or with	out reasonable accommodation	osition as described in the Position on? YesNo If you wo own at this time what that would b	uld require an accommoda	
Please identify if you have relative(s)If yes, pl		e department for which you are ap	oplying. No relatives	Yes, I have (a)
Are you legally eligible fo	r employment in the United S	States? YesNo		
Applicant Attestation: By	my signature below, I decla	re and affirm that I have read and	l fully understand that:	
(including but not limited is shall be sufficient cause fo	o the letter of application an	this application or in any other moder resume/CV), or in any oral state and including termination, in the eving hired;	ements I may make during	the selection process
		cation of data and reference checlerification may, but need not, begi		
An offer of employment is creview of references, satisj		pletion of the entire employment s	election process, including	g the receipt and
No manager or representa				
		ity to make an offer of employment or collective bargaining agreemen		
which is in violation of the	bylaws, rules, regulations, o		ts governing the City Univ	
which is in violation of the Any representations that a Under federal law, CUNY	bylaws, rules, regulations, or contrary to these policies,	or collective bargaining agreement even when made in writing, are un loyment eligibility and my identity	ts governing the City Univnenforceable;	ersity of New York;

List	schools attended, beginning with m	ost recent (college, business sc	hool, high school, vocati		
	School Name	Location	Major Study	Credits Completed	Degree Received/Date
1.					
2.					
3.					
	EMPLOYMENT HISTORY: ng all job-related full or part time er essary.	Begin with present or last joint ployment. Be sure to include			
1.	Employer Name		Address		
	Dates Employed: From / Mo. Y	To/_ Tr. Mo. Yr.			
	Full TimePart Time	Average number of hours	ner week	nal Base Salary/Indicate	
	Reason for Leaving		()	Annual \$() We	ekly \$
	<u>8</u>			() Hourly \$_	
	Name/Title of Immediate Supervi	sor	Teleph	one Number	
	Briefly Describe Duties:				
2.	Employer Name		Address		
	Dates Employed: From/_ Mo. Y	To/_ Tr. Mo. Yr.			
	Full TimePart Time	Average number of hour	rs per week	nal Base Salary/Indicate	
	Reason for Leaving			Annual \$() W	
				() Hourly \$_	
	Name/Title of Immediate Supervis	sor	Telephoi	ne Number	

3.	Employer Name Addr	ress
	Dates Employed: From / To / Job Title Job Titl	-
	Full TimeAverage number of hours per week	Final Base Salary/Indicate One: () Annual \$() Weekly \$
	Name/Title of Immediate Supervisor	Telephone Number
	Please explain any gaps in employment in excess of two months during the particle.	ast 15 years.
C.	Other Important Skills, Competencies, or Experience Not Identified Aborelated experiences (such as volunteer work, competence in a foreign language your suitability for this position.	
D.	Other Background Questions:	
1.	Have you previously been employed by CUNY in a position not reported in S name of college, name and title of supervisor, dates of employment, title(s), a	
2.	Have you ever been discharged or asked to resign from any employment? No	oYesIf yes, please explain briefly.

3.	violations or convictions sealed, expu				
4.	Are there any criminal charges or viol No Yes	ations (except for	traffic violations) <u>currently</u> per	nding against y	you?
	Note: A conviction record will not not reviewed in accordance with guideline the truth will, when discovered, auton selected.	es established by t	he University and in accordance	with New Yo	ork State Law. Failure to tell
5.	Please explain below all past conviction	ons or currently pe	ending charges against you (as s	pecified in qu	estions 3 and 4 above):
_	Offense	Date/ Conviction	Name/Location of Cor	ırt	Disposition including incarceration
				,	
6.	Are you a retiree of either a New York If yes, are you willing to suspend pens				
7.	The City University of New York may				
	which you supply. Please list a minin definite knowledge of your qualificati				ot related to you and who have
				ı	
		PROFESSI	ONAL REFERENCES		
	Kindly provide name, title, address, da	aytime telephone i	number, and company affiliation	n for each refe	rence listed.
	Name, Title	Ado	dress/Phone Number	Con	npany Affiliation



THE CITY UNIVERSITY OF NEW YORK

AUTHORIZATION TO RELEASE REFERENCE INFORMATION

COLLEGE_	
Name of Candidate (PLEASE PRINT)	
Position Sought	
I have applied for a position with The City University of New York informed of my qualifications for the position. I hereby authorize a reference, and education/training provider, to disclose in good faith and pertaining to my qualifications and fitness for employment.	any current or former employer, professional
I agree to hold such employers, references, educational/training instreferences harmless from liability or damages for providing the rec	
A photocopy or fax of this authorization shall be as valid as the ori	iginal.
Signature	Date



	PERSONAL	D A	ATA FORM
IATION	Prefix	MATION	Number, Street Apt#
INFORM	Last Name	INFORMATION	City
GENERAL INFORMATION	First Name	CONTACT	State Zip Code
GE	Middle Name	00	() Home Telephone # Work Telephone #
PERSONAL INFORMATION	Social Security Number Gender: Female Male Date of Birth	ETHNICITY	Please check the category that is most appropriate to your background.* (B) White (not Hispanic) (C) Black (not Hispanic) (D) Hispanic (of any race) (E) Puerto Rican (F) Asian (G) American Indian or Alaskan Native (H) Italian American
MARITAL STATUS	Married Single Divorced Legally Separated Widowed	HIP STATUS	(I) Native Hawaiian or Pacific Islander U.S. Citizen Yes No If No: Country of Origin Resident Alien Non-Resident Alien Have you clearance to work in the U.S.? Yes No
VETERAN STATUS	Veteran – other than Vietnam Veteran – Vietnam No Service	CITIZENSHIP	Type of Visa Primary purpose in the U.S Intended length of stay
TACT 1	Name	TACT 2	Name
EMERGENCY CONTACT 1	Address City State Zip () () Home Telephone # Work Telephone #	EMERGENCY CONTACT 2	Address City State Zip () () Home Telephone # Work Telephone #
EDUCATIONAL DATA	Highest Educational Level: (Attach proof of degree) High School Diploma or Equivalence Associate Degree Bachelors Degree Masters Degree Doctorate		Employee Signature Date

^{*}We are required by law to monitor our Affirmative Action Program, and to collect ethnic data on all employees under Federal Executive Order #11246. Submission of this information is voluntary.

The City University of New York

New Employee Tax Compliance Notification Sheet

The Internal Revenue Service ("IRS"), the U.S. government tax authority, has issued strict regulations regarding the taxation and reporting of payments made to non-U.S. citizens. As a result, the City University of New York ("CUNY") may be required to withhold U.S. income tax and file reports with the IRS in connection with payments made by the CUNY to employees (e.g., faculty, staff, and student employees) who are not U.S. citizens or permanent resident aliens (i.e., green card holders) and who receive payment for services. In addition, CUNY is required to report payments to the IRS.

All individuals who are not citizens or permanent resident aliens of the United States are required to complete an Individual Record using the GLACIER online Tax Compliance System. If you are a new employee, you must go in person to receive a password and instructions of how to access GLACIER from the Nonresident Alien Tax Specialist. If you have already completed your Individual Record in GLACIER, additional or updated information may be required.

GLACIER is accessible via the Internet from any web-accessible computer from anywhere in the world. When you receive your password and instructions, please complete the information on **GLACIER** immediately. **GLACIER** is simple and convenient to use; however, if you assistance, you should contact the Nonresident Alien Tax Specialist. Once you have completed the information in **GLACIER**, you must schedule an appointment with the Nonresident Alien Tax Specialist; please bring all completed forms and original documents to the appointment.

Please note: You must complete the entire process within 7 business days from the date you sign this notification sheet. If you do not complete the entire process within 7 business days, the maximum rate of U.S. federal income tax and all other applicable taxes, including FICA, will be withheld from all payments until you access GLACIER to input information and submit your forms for processing. Any tax withheld because the required tax information was not provided will not be refunded by CUNY.

The Nonresident Alien Tax Specialist is located at:

Lehman College - Human Resources Shuster Hall Room 230 718-960-8447 – Iasia Bailey

E-mail: mailto:iasia.bailey@lehman.cuny.edu

I have been notified of my requirement to complete certain information in **GLACIER**. I understand that I must go to the Nonresident Alien Tax Specialist office to obtain access and instructions for **GLACIER**.

Employee Name (Print)	
	Date
Employee Signature	
	Employee Phone Number
E-mail Address	
	Date

Original to Nonresident Alien Tax Specialist Copy to Employee Copy to Form I-9 Certifier Copy to Human Resources



York State Civil Service La complete the following oath	of the New York State Education La aw, every employee of the College is a n of allegiance.	required to review and
A	AMENDED OATH OF ALLEGIA	ANCE
PRINT (Last Name)	PRINT (First Name)	PRINT (M. I.)
DEPARTMENT		
and the Constitution of the S	are that I will support the Constitution of State of New York, and that I will faithaccording to the constitution of th	fully discharge the duties of the
	(Signature of S	staff Member)
	(Post Office ad	Idress of Staff Member)
	Date	



NOTICE TO EMPLOYEE

Under an act recently passed by the New York State Legislature and by agreement between the City and municipal employee unions, employees in titles which are represented in collective bargaining but who are not union members are subject to a deduction from their salary in an amount equal to the dues payable by a union member.

STATEMENT

I have been informed that I have the right to join or refrain from joining the union certified for my title. I understand that if I refrain from joining I will be subject to an Agency Shop fee deduction which shall be an amount equivalent to the amount of dues payable by a union member.

Employee's Signature		Date
T	O BE FILLED OUT BY Notice to Un	
	-	tatus of the employee as indicated below:S.S. No//
Employee Home Address:		
Title:		_Title Code No
Payroll: Bank	Dept. No	Paycheck Frequency
Leave Status:	Job Code:	Distribution No
Payroll Clerk:	Payroll Clerk's Sigr	nature
Agency:	Agency Address	
	(Name of Unio	on)
Weekly, bi-Weekly, 28 day	, monthly, four times a se	emester
further processing.		above Agency Payroll Section receives this form for
	FILLED OUT BY THE A	
Please start Agency Shop deduction	ons for the employee as follows	:
Code:	Am	ount: \$
	h the Employer. It is further ce	ed to this union and covered under an Agency Shop Fee ertified that the amount of Agency Shop Fee deduction able by a member.

Name of Union Official:

THE CITY UNIVERSITY OF NEW YORK: FORM210 Certification of Prior NYS or NYC Public Service

Collection of Public Pension Funds: Calendar Year _____

Dear CUNYjob candidate:

The New York State Retirement and Social Security Law requires retirees of a public pension plan within the State or City of New York to disclose prior public employment and pension plan history to The City University New York for the purpose of establishing a retiree's eligibility for employment. Failure to disclose such information can result in the suspension or diminution of the retiree's public pension benefits

INSTRUCTIONS: Please complete Sections A, B and C as they pertain to you, and then sign the bottom portion of the form. A copy of this form will be required to be submitted prior to any appointment decision made by the college. *You are responsible* for forwarding a copy of the signed form to the college personnel office. (Adjuncts who have checked #2 in Section B must submit this form every semester in which their employment continues)

Section A		
Name (last, first)	Social Security No	umber
Position Applied for	College	
Section B: Affidavit or Prior Se	ervice (Please check the one which app	lies to you):
1) —I have no prior service York City or New York St	e with a public service agency, organizati	on or jurisdiction funded by New
2) I am a former emplo I am collecting a reti the State or City of New Y	oyee ofof the C rement benefit from a public pension system. Fork (please provide pension plan name) retirement benefit based upon this public	etem (including an ORP) maintained by
Section C: <u>Current Positions in</u> Section B):	Public Service (Please check one of t	he following only if you checked #2 in
New York City or New Yor 2) — I am now working for	working for another public service agency ork State, nor have I worked at any such er, or have worked for during the calendar funded by New York City or New York <i>employment)</i> :	entity during the calendar year; year, another public service agency,
· ·	the information I have provided abov	e is correct to the best of my
knowledge. Signature:	Date:	
Witnessed by: Department	Title Official	Date:
Received by:		Date:



CONVICTION NOTICE AND LICENSE REGISTRATION FORM

 $Upon \ appointment, this form \ will \ be \ used \ to \ verify \ your \ claims; \ convictions \ will \ be \ verified \ with \ the \ New \ York \ State \ Division \ of \ Criminal \ Justice \ Services.$

ENAME FNAME FNAME M.I. Please list below any other name you may be known by (this includes maiden name): LINAME FNAME M.I. FNAME M.I. STREET ADDRESS AFT # CITY OR TOWN STATE TIPCODE HOME PHONE # WORK PHONE # ())	PL	LASE	L AN	SWE	K AI	ır Qı	UESI	HON	S, on	e cha	racte	r per	space	е.																		
Please list below any other name you may be known by (this includes maiden name): LNAME FNAME M.I. STREET ADDRESS CITY OR TOWN STATE LICENSE OR PROFESSIONAL REGISTRATION: (If required for position or as stated in the vacancy notice or exam announcement, such as driver's license, engineer's license, etc.) 1. Name of License/Registration valid in NYC Date Originally Issued Renewal No. (if any) Have you ever had a license, certificate or permit suspended or revoked? Ves Name of License/Registration valid in NYC License # No. If yes, give full details.		SSN # DATE:																														
Please list below any other name you may be known by (this includes maiden name): LNAME FNAME M.I. STREET ADDRESS CITY OR TOWN STATE LICENSE OR PROFESSIONAL REGISTRATION: (If required for position or as stated in the vacancy notice or exam announcement, such as driver's license, engineer's license, etc.) 1. Name of License/Registration valid in NYC License # Name of License Registration valid in NYC Have you ever had a license, certificate or permit suspended or revoked? Yes No. If yes, give full details. 2. Name of License/Registration valid in NYC License # Name of Issuing Agency Date Of spirally Issued Renewal No. (if any) Date of Expiration Date Last Renewed Date Originally Issued Date Originally Issued Date Originally Issued Date Of spirally Issued Date Of spirally Issued Date Of Expiration					-	-		_									,		′													
STREET ADDRESS CITY OR TOWN STATE LICENSE OR PROFESSIONAL REGISTRATION: (If required for position or as stated in the vacancy notice or exam announcement, such as driver's license, engineer's license, etc.) 1. Name of License/Registration valid in NYC Date Originally Issued Renewal No. (if any) Date of Expiration Have you ever had a license, certificate or permit suspended or revoked? Ves Name of License/Registration valid in NYC License # No. If yes, give full details.	LN	AME		1	1	1		1		1	1	ı	1		FNA	ME	1			1						1	1	7		M.I.	1	
STREET ADDRESS CITY OR TOWN STATE LICENSE OR PROFESSIONAL REGISTRATION: (If required for position or as stated in the vacancy notice or exam announcement, such as driver's license, engineer's license, etc.) 1. Name of License/Registration valid in NYC Date Originally Issued Renewal No. (if any) Date of Expiration Have you ever had a license, certificate or permit suspended or revoked? Yes No. If yes, give full details. 2. Name of Issuing Agency Date Originally Issued Date Originally Issued Renewal No. (if any) Date of Expiration																																
STREET ADDRESS CITY OR TOWN STATE STATE LICENSE OR PROFESSIONAL REGISTRATION: (If required for position or as stated in the vacaney notice or exam announcement, such as driver's license, engineer's license, etc.) 1. Name of License/Registration valid in NYC License # Date Originally Issued Renewal No. (if any) Date of Expiration Have you ever had a license, certificate or permit suspended or revoked? Yes Name of License/Registration valid in NYC License # No. If yes, give full details.	Plea	ise lis	t bel	ow ar	ny oth	er na	me yo	ou ma	y be l	knowi	ı by (this ir	nclude	es ma	aiden	name):															
CITY OR TOWN STATE LICENSE OR PROFESSIONAL REGISTRATION: (If required for position or as stated in the vacancy notice or exam announcement, such as driver's license, engineer's license, etc.) 1. Name of License/Registration valid in NYC Date Originally Issued Renewal No. (if any) Have you ever had a license, certificate or permit suspended or revoked? Yes No. If yes, give full details.	LN	AME	,	1	1		1				1	Т	1		FNA	ME	ı		1	ı	1					ı	ı	_		M.I.	1	
CITY OR TOWN STATE LICENSE OR PROFESSIONAL REGISTRATION: (If required for position or as stated in the vacancy notice or exam announcement, such as driver's license, engineer's license, etc.) 1. Name of License/Registration valid in NYC Date Originally Issued Renewal No. (if any) Have you ever had a license, certificate or permit suspended or revoked? Yes No. If yes, give full details.																																
STATE ZIPCODE	ST	REET	ΓAD	DRE	SS		1				1	1	1					ı	1							ı	1	_	AP	T#	ı ı	
STATE ZIPCODE																																
STATE ZIPCODE																																
HOME PHONE # Comparison Co	CIT	CITY OR TOWN																														
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LICENSE OR PROFESSIONAL REGISTRATION: (If required for position or as stated in the vacancy notice or exam announcement, such as driver's license, engineer's license, etc.) 1. Name of License/Registration valid in NYC License #	ST	ATE													ZIPC	ODE	1															
LICENSE OR PROFESSIONAL REGISTRATION: (If required for position or as stated in the vacancy notice or exam announcement, such as driver's license, engineer's license, etc.) 1. Name of License/Registration valid in NYC License #																			_													
(If required for position or as stated in the vacancy notice or exam announcement, such as driver's license, engineer's license, etc.) 1. Name of License/Registration valid in NYC License #	но	ME l	РНО	NE #											WOR	K PE	IONI	Ξ#														
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Comparison of the vacancy notice of exam announcement, such as driver's license, engineer's license, etc.) Name of License/Registration valid in NYC																													—			
1. Name of License/Registration valid in NYC License #												tice o	or exa	ım aı	nnour	ıceme	ent, s	uch a	ıs dri	ver's	licei	nse,	engir	ieer	's lic	cense	, etc	.)				
Name of Issuing Agency		•		_							-																					
Date Originally Issued			Na	ime o	f Issu	ing A	genc	y																								
Renewal No. (if any)																				Dat	e Las	st Re	newe	ed								
As a license, certificate or permit suspended or revoked?YesNo. If yes, give full details. 2. Name of License/Registration valid in NYC License # Name of Issuing Agency Date Originally Issued Date Last Renewed Renewal No. (if any) Date of Expiration			Re	newa	l No.	(if an	ıy)																									
2. Name of License/Registration valid in NYC License # Name of Issuing Agency Date Originally Issued Date Last Renewed Renewal No. (if any) Date of Expiration																			es .		1	No.	If ye	s, gi	ve fi	ıll de	tails.					
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Name of Issuing Agency Date Originally Issued																																_
Name of Issuing Agency Date Originally Issued	_																															_
Name of Issuing Agency Date Originally Issued	2.		Na	ime o	f Lice	nse/R	Regist	ration	valio	d in N	YC							Li	cense	e #												
Date Originally Issued Date Last Renewed Renewal No. (if any) Date of Expiration																																
Renewal No. (if any) Date of Expiration																							newe	ed_								
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REVISED CONVICTIONS To be used instead of Form 602a R-01/01 (Applicants for Security and Public Safety positions are subject to a more vigorous criminal history background check.)

A conviction record will not necessarily disqualify you from the position for which you are applying. Each record is reviewed to determine eligibility in accordance with guidelines established by the University and in accordance with New York State Law. However, FAILURE TO REPORT THE REQUIRED INFORMATION WILL AUTOMATICALLY DISQUALIFY YOU REGARDLESS OF THE REASON FOR THE OMISSION/FALSIFICATION.

For each conviction or pending charge, you may state facts in favor of your employment on a separate sheet to be attached to this form. These facts will be considered when your application is being reviewed.

Were you ever convicted of an offense anywhere including felonies, misdemeanors or violations (except for traffic violations or convictions sealed,

A suspended sentence, a fine, a conditional discharge, a Certificate of Relief from Disabilities, or an adjournment in contemplation of dismissal, does not expunge an offense from your record, and the offense must be reported.

expunged or set	aside under Federal or State law)	?		
Answer YES or	NO			
conviction. If you are unsur	re whether a conviction was sealed, r r violations, which need not be repor	espond yes to the question and	explain below or in an attac	because of your age at the time of the hment why you are unsure. Most traffic oxicated, are classified as misdemeanors or
2. Are there any cri	minal charges or violations (except f	or traffic violations) currently	pending against you?	
Answer YES or	NO			
violations, all yo	w, please list: a) all felony convictio ur convictions and pending charges <u>f</u> icate of Relief from Disabilities, and	for the past 10 years. If none,	write "NONE". You must	ived; and b) for misdemeanors and list convictions even if you plead guilty or
Date of Conviction	Offense of which you	Name/location		Disposition including
(Mo/Yr)	were convicted	of court		incarceration
YOUR REMOVAL FROM COURT OR OTHER RECABOVE. DECLARATION FOR THE	M CUNY SERVICE AND MAY RICORDS. REMEMBER TO RESPO	ESULT IN CRIMINAL PROS OND TO THE THREE QUES	SECUTION. YOUR STA STIONS AND FILL IN TI DATE:	I YOUR DISQUALIFICATION AND TEMENTS WILL BE CHECKED USING HE INFORMATION REQUESTED
I,	ame)	, residing at		
(Print na	ame)		(Address)	
do declare that all the staten	nents contained herein are true and co	orrect to the best of my knowled	lge	(Signature)
	To be co	ompleted by College HR/Perso	onnel Department	
Candidate	Colle	ge	Dept	Date
CSC Title	Actio	on (Appt, Trans, Reinst)	App't Date	Status
Completed by		Title		Date
		HR/Personnel Director		
				(Signature)

Direct Deposit Form for NYS Employees

Section A: Employee Informa	tion	(10 be use	ed for enrollme	ent, change	s and cancellations)		
• •					***	ODIZ DIJONE # /	
NAME (LAST, FIRST, MI)					W	ORK PHONE # (
LAST FOUR DIGITS OF SO	CIAL SEC	CURITY	#		A	GENCY/DEPT COI	DE
For more than three accounts or if you part amount or percentage deposits may be						ditional forms as necessary	7. Up to seven fixed
Section B: Account Type	New or Additional *	Change Joint Account Holder *	Change Amount or Percentage	Cancel	Name of Financial Institution	Account Number	Amount, Percentage or Excess
	(✔)	(✔)	(✔)	(✔)			
1. □ Savings □ Checking							
2. □ Savings □ Checking							
3. □ Savings □ Checking							
*For new/additional accounts with joint ac	ccount holders	or to add a j	oint account h	older to e	xisting accounts, bo	th signatures are required in	Section D.
Section C: This section must be funds into a savings account of name MUST appear on the account of the section and the section must be section	or into a ch ccount(s). ed financial ins	ecking ac	eccount if a	voided s instituti	personal chec	k is not attached. The and agree to receive and d	he employee's deposit the salary to
the account shown above in accordance Salary credited to the account below w					ations of the State	of New York and to be bou	and by such rules.
1. NAME OF FINANCIAL INSTI						Account Type Sav	rings
Depositor's Account Number (EF	T Format)				_	Routing Number	-
Print or Type Representative's Name	e	Signature of Representative				Felephone Number	Date
2. NAME OF FINANCIAL INSTI	ITUTION					Account Type	rings
Depositor's Account Number (EF	Γ Format)					Routing Number	_
Print or Type Representative's Name	e	Signature o	of Representa	ative	,	Telephone Number	Date
3. NAME OF FINANCIAL INSTI	ITUTION					Account Type	vings □ Checking
Depositor's Account Number (EF	Γ Format)				_	Routing Number	_
Print or Type Representative's Name	e	Signature o	of Representa	ative	,	Telephone Number	Date
	· ·						
Section D: Employee/Joint A this form, including the author financial institution(s) to be deposite on the corresponding line for new/ac	orization for ed into the spe	r recover	ry. In signir ount(s). The	ng this for	rm, I authorize m	y salary payment to be se	nt to the designated
Employee Signature						Date	
B-1 Joint Account Holder						Date	
B-2 Joint Account Holder							
B-3 Joint Account Holder						Date	

INSTRUCTIONS: Please complete the form as described below, and then forward it to your agency/department payroll or personnel office. You can also contact that office for assistance in completing the form.

<u>NEW/ADDITIONAL ACCOUNT OR CHANGES IN ACCOUNT HOLDERS:</u> Employee **must** complete Sections **A**, **B**, and **D** for each new/additional account or for changes in account holders. See instructions below for Section **C**.

Section A: Indicate your name, work phone number and Agency/Department code. For your personal privacy, enter only the last four digits of your social security number.

Section B: To enroll in direct deposit or add an account, place a check mark in the account type (checking or savings) and in the "New or Additional" column. For changes in account holders, place a check mark in the account type and in the appropriate "Change" column. Indicate the name of the financial institution, account number, and amount or percentage to be deposited.

- Employees may choose **up to seven** fixed amount or percentage deposits, as well as **one excess** (net pay) deposit. This form accommodates up to three accounts. For more than three accounts or if you prefer to list each financial institution on a separate form, use additional forms as necessary.
- Account number is obtained from a personal check, bank statement, or the financial institution.
- To deposit a fixed amount, enter a specific amount (may include cents, e.g. \$100.25). To deposit a portion of the paycheck, enter a specific percent (must be a full percentage, e.g. 50%). Write the word "excess" to deposit the remainder of monies after all other distributions.

Section C: For Savings Accounts, this section **must** be completed by your financial institution(s). For Checking Accounts, this section **must** be completed by your financial institution(s) if you are **not** attaching a voided personal check. The employee's name **must** appear on the account.

Section D: The Employee/Joint Account Holder Certification **must** be signed by the employee in **all** instances and any joint account holder if this is a new/added account. By signing this form, the employee and any joint account holder each allows the State, through the financial institution, to debit the account in order to recover any salary to which the employee was not entitled or that was deposited to the account in error. This means of recovery shall not prevent the State from utilizing any other lawful means to retrieve salary payments to which the employee is not entitled.

<u>CHANGES TO MONEY OR PERCENTAGE AMOUNT</u>: Employees may add, change or cancel the money or percentage amount deposited to an account by completing Sections **A**, **B**, and **D** of a new Direct Deposit Form. Section **C** does **not** need to be completed for these changes. In Section **B**, place a check mark in the appropriate "Change" column. New fixed amount or percentage direct deposits will be assigned a lesser priority than existing fixed amount or percentage direct deposits. For example, if an employee's pay is not sufficient to cover all direct deposits, the most recently designated direct deposit(s) will not be taken.

To change direct deposit priorities, please contact your agency payroll or personnel office. Financial institution changes may take up to two payroll periods to become effective. Employees should maintain accounts canceled and replaced by new accounts until the new transaction is complete. If canceled accounts are not temporarily maintained until the new account receives the employee's direct deposit transaction, employees may experience a delay in payments. Joint account holder's signature is not required for these transactions.

<u>CANCELLATIONS</u>: The agreement represented by this authorization will remain in effect until canceled by the employee, the financial institution, or the State agency. To cancel the agreement, the employee **must** complete Sections **A**, **B** and **D** of a new Direct Deposit Form for the transaction(s) to be canceled. Joint account holder's signature is not required. The financial institution may cancel the agreement by providing the employee and the State agency with a written notice 30 days in advance of the cancellation date. The financial institution cannot cancel the authorization without notification to both the employee and the State agency. The State agency may cancel an employee's direct deposits when internal control policies would be compromised by this form of salary payment.

Additional Information

The information on this form is required pursuant to Part 102 of the Codes, Rules and Regulations of New York State (2 NYCRR 102). This form is a legal document and cannot be altered by the agency, employee or financial institution. If there are any changes, the employee must complete a new form. The information supplied by the employee will be provided only to the designated financial institution(s) and/or their agent(s) for the purpose of processing payments. Failure by the employee to provide the requested information may delay or prevent the receipt of payments through the Direct Deposit/Electronic Funds Transfer Program of the Bureau of State Payroll Services, NYS Office of the State Comptroller.

Form W-4 (2013)

Purpose. Complete Form W-4 so that your employer can withhold the correct federal income tax from your pay. Consider completing a new Form W-4 each year and when your personal or financial situation changes.

Exemption from withholding. If you are exempt, complete **only** lines 1, 2, 3, 4, and 7 and sign the form to validate it. Your exemption for 2013 expires February 17, 2014. See Pub. 505, Tax Withholding and Estimated Tax.

Note. If another person can claim you as a dependent on his or her tax return, you cannot claim exemption from withholding if your income exceeds \$1,000 and includes more than \$350 of unearned income (for example, interest and dividends).

Basic instructions. If you are not exempt, complete the Personal Allowances Worksheet below. The worksheets on page 2 further adjust your withholding allowances based on itemized deductions, certain credits, adjustments to income, or two-earners/multiple jobs situations.

Complete all worksheets that apply. However, you may claim fewer (or zero) allowances. For regular wages, withholding must be based on allowances you claimed and may not be a flat amount or percentage of wages.

Head of household. Generally, you can claim head of household filing status on your tax return only if you are unmarried and pay more than 50% of the costs of keeping up a home for yourself and your dependent(s) or other qualifying individuals. See Pub. 501, Exemptions, Standard Deduction, and Filing Information, for information.

Tax credits. You can take projected tax credits into account in figuring your allowable number of withholding allowances. Credits for child or dependent care expenses and the child tax credit may be claimed using the **Personal Allowances Worksheet** below. See Pub. 505 for information on converting your other credits into withholding

Nonwage income. If you have a large amount of nonwage income, such as interest or dividends, consider making estimated tax payments using Form 1040-ES, Estimated Tax for Individuals. Otherwise, you income, see Pub. 505 to find out if you should adjust your withholding on Form W-4 or W-4P

Two earners or multiple jobs. If you have a working spouse or more than one job, figure the total number of allowances you are entitled to claim on all jobs using worksheets from only one Form W-4. Your withholding usually will be most accurate when all allowances are claimed on the Form W-4 for the highest paying job and zero allowances are claimed on the others. See Pub. 505 for details

Nonresident alien. If you are a nonresident alien, see Notice 1392, Supplemental Form W-4 Instructions for Nonresident Aliens, before completing this form.

Check your withholding. After your Form W-4 takes effect, use Pub. 505 to see how the amount you are having withheld compares to your projected total tax for 2013. See Pub. 505, especially if your earnings exceed \$130,000 (Single) or \$180,000 (Married).

Future developments. Information about any future developments affecting Form W-4 (such as legislation enacted after we release it) will be posted at www.irs.gov/w4.

0	o carriere, manapie je		may owe additional tax. If yo	ou have pension or annuity		
		Persona	l Allowances Works	heet (Keep for your records.)		
A	Enter "1" for yo	urself if no one else can o	claim you as a dependent	t		A
	(You are single and have	e only one job; or)	
В	Enter "1" if:	 You are married, have 	only one job, and your sp	pouse does not work; or	} .	В
	l	 Your wages from a sec 	ond job or your spouse's v	wages (or the total of both) are \$1,50	00 or less. ^J	
С				ou are married and have either a w	orking spouse o	or more
	than one job. (E	intering "-0-" may help yo	u avoid having too little ta	ax withheld.)		· · C
D	Enter number of	f dependents (other than	your spouse or yourself)	you will claim on your tax return.		D
E	Enter "1" if you	will file as head of house	hold on your tax return (s	see conditions under Head of hou s	sehold above)	E
F				expenses for which you plan to cla		F
				d and Dependent Care Expenses,		
G				72, Child Tax Credit, for more info		
), enter "2" for each eligible child; t	hen less "1" if y	ou
		x eligible children or less	· · · · · · · · · · · · · · · · · · ·			
	•	· ·		\$119,000 if married), enter "1" for each	ŭ	
Н	Add lines A throu	•	•	from the number of exemptions you cl	•	· —
	For accuracy,	 If you plan to itemize and Adjustments W 		income and want to reduce your with	hholding, see the	Deductions
	complete all			or are married and you and your	spouse both wo	ork and the combine
	worksheets	earnings from all jobs	exceed \$40,000 (\$10,000 i	f married), see the Two-Earners/M	ultiple Jobs Wo	rksheet on page 2 t
	that apply.	avoid having too little ta			Las Park Earl Earl	an NAV A landana
		• It neitner of the above	e situations applies, stop n	nere and enter the number from line I	on line 5 of For	n vv-4 below.
		Separate here and	give Form W-4 to your en	nployer. Keep the top part for your	records	
	W A	Fmplove	e's Withholding	g Allowance Certifica	te l	OMB No. 1545-0074
Form	VV -4		_		i	$\bigcirc \bigcirc $
	ment of the Treasury I Revenue Service			er of allowances or exemption from wit be required to send a copy of this form t		<u> </u>
1		and middle initial	Last name		2 Your social	security number
	Home address (r	number and street or rural route)	3 Single Married Mar	ried, but withhold at	higher Single rate.
				Note. If married, but legally separated, or spo		
	City or town, sta	te, and ZIP code		4 If your last name differs from that	shown on your so	ial security card,
				check here. You must call 1-800-	772-1213 for a rep	lacement card. ▶
5	Total number	of allowances you are cla	iming (from line H above	or from the applicable worksheet	on page 2)	5
6	Additional am	ount, if any, you want witl	nheld from each paychec	k	[6 \$
7	I claim exemp	otion from withholding for	2013, and I certify that I r	meet both of the following conditio	ns for exemption	า.
	• Last year I h	nad a right to a refund of a	II federal income tax with	held because I had no tax liability,	and	
	• This year I e	expect a refund of all fede	ral income tax withheld b	ecause I expect to have no tax liab	oility.	
		<u> </u>	<u>'</u>		7	
Unde	er penalties of perj	jury, I declare that I have ex	amined this certificate and	, to the best of my knowledge and be	elief, it is true, co	rrect, and complete.
Empl	loyee's signature)				
(This	form is not valid ι	unless you sign it.) ▶			Date ►	
8	Employer's name	e and address (Employer: Com	plete lines 8 and 10 only if sen	ding to the IRS.) 9 Office code (optional)	10 Employer ide	entification number (EIN)

Form W-4 (2013) Page **2**

			Deduct	ions and A	diust	ments Works	heet					
Note	Use this work	sheet <i>only</i> if						to income				
1	Enter an estimat and local taxes, income, and mis and you are man	e of your 2013 it medical expens scellaneous dedu ried filing jointly	emized deductions. These es in excess of 10% (7.5% ctions. For 2013, you may or are a qualifying widow(e	include qualifyin 6 if either you on have to reduce yer); \$275,000 if yo	g home r your s your ite ou are h	e mortgage interest, c spouse was born beformized deductions if y nead of household; \$2	haritable contribution ore January 2, 19 wour income is over 250,000 if you are	utions, state 949) of your er \$300,000 e single and	4 ¢			
		•		•		y separately. See Fut 1	o. 303 for details		ι φ			
2	Enter: { \$8	3,950 if head	of household		v(er)	}			2 \$			
_			• .	•					o ¢			
3									· -			
4	· · · · · · · · · · · · · · · · · · ·											
5	Withholding Allowances for 2013 Form W-4 worksheet in Pub. 505.)											
6									6 \$			
7									7 \$			
8			-						8			
9									9			
10												
							or multiple j	obs on page	e 1.)			
Note.		,		•	•	•						
1			. • .	•			-	,	1			
2	you are marri	ed filing jointl	y and wages from the	e highest pay	ing job	are \$65,000 or I			2			
3	If line 1 is m	ore than or	equal to line 2. subt	ract line 2 fro	om line	e 1. Enter the re	sult here (if z	ero. enter	- —			
Ū			-				•		3			
Note.			· -									
					_	•	cg c					
4	_		-	-	-		4					
5							-					
6									6			
7									_			
8									<u> </u>			
9		•					•		· ·			
-		-		-				-				
									9 \$			
		Tab	le 1				Tal	ble 2				
	Married Filing			s		Married Filing J			All Other	'S		
		Enter on line 2 above	If wages from LOWEST paying job are—	Enter on line 2 above			Enter on line 7 above	0		Enter on line 7 above		
\$	0 - \$5,000	0	\$0 - \$8,000	0		\$0 - \$72,000	\$590			\$590		
		1 2	8,001 - 16,000 16,001 - 25,000	1 2			980			980 1.090		
24,00	1 - 26,000	3	25,001 - 30,000	3	200	0,001 - 345,000	1,290	175,001 - 3	385,000	1,290		
26,00	Subtract line 2 from line 1. If zero or less, enter "-0-" Subtract line 2 from line 1. If zero or less, enter "-0-" Add lines 3 and 4 and enter the total. (include any amount for credits from the Converting Credits to Withholding Allowances for 2013 Form W-4 worksheet in Pub. 505.) Enter an estimate of your 2013 norwage income (such as dividends or interest) Subtract line 6 from line 5. If zero or less, enter "-0-" 7 \$ Divide the amount on line 7 by \$3,900 and enter the result here. Drop any fraction 8 Enter the number from line 5. If zero or less, enter "-0-" Add lines 8 and 9 and enter the total here. If you plan to use the Two-Earners/Multiple Jobs Worksheet, also enter this total on line 1 below. Otherwise, stop here and enter this total on line 7 by \$3,900 and enter the result here. Drop any fraction 8 Enter the number from the Personal Allowances Worksheet, line H, page 1 Two-Earners/Multiple Jobs Worksheet (See Two earners or multiple jobs on page 1.) 8 Use this worksheet only if the instructions under line H on page 1 direct you here. Enter the number from line H, page 1 (or from line 10 above if you used the Deductions and Adjustments Worksheet) Find the number from line H, page 1 (or from line 10 above if you used the Deductions and Adjustments Worksheet) Find the number in Table 1 below. Otherwise, stop here and enter three the result here. However, if you are married filing jointly and wages from the highest paying job and enter it here. However, if you are married filing jointly and wages from the highest paying job are \$55,000 or less, do not enter more than "3" 2 If line 1 is more than or equal to line 2, subtract line 2 from line 1. Enter the result here (if zero, enter "-0-" on Form W-4, line 5, page 1. Complete lines 4 through 9 below to figure the additional withholding amount necessary to avoid a year-end tax bill. Enter the number from line 2 of this worksheet 5 Subtract line 5 from line 4 Find the amount in Table 2 below that applies to the HIGHEST paying job and enter it											
				5 6	38	o,uu1 and over	1,540					
48,00	1 - 55,000	7	70,001 - 80,000	7								
	11 - 65,000 11 - 75,000	8 9	80,001 - 95,000 95,001 - 120,000	8 9								
	11 - 75,000	10	120,001 - 120,000 120,001 and over	10								
85,00	1 - 97,000	11										
	11 - 110,000 11 - 120,000	12 13										
	1 - 135,000	14										

Privacy Act and Paperwork Reduction Act Notice. We ask for the information on this form to carry out the Internal Revenue laws of the United States. Internal Revenue Code sections 3402(f)(2) and 6109 and their regulations require you to provide this information; your employer uses it to determine your federal income tax withholding. Failure to provide properly completed form will result in your being treated as a single person who claims no withholding allowances; providing fraudulent information may subject you to penalties. Routine uses of this information include giving it to the Department of Justice for civil and criminal litigation; to cities, states, the District of Columbia, and U.S. commonwealths and possessions for use in administering their tax laws; and to the Department of Health and Human Services for use in the National Directory of New Hires. We may also disclose this information to other countries under a tax treaty, to federal and state agencies to enforce federal nontax criminal laws, or to federal law enforcement and intelligence agencies to combat terrorism.

135,001 and over

You are not required to provide the information requested on a form that is subject to the Paperwork Reduction Act unless the form displays a valid OMB control number. Books or records relating to a form or its instructions must be retained as long as their contents may become material in the administration of any Internal Revenue law. Generally, tax returns and return information are confidential, as required by Code section 6103.

The average time and expenses required to complete and file this form will vary depending on individual circumstances. For estimated averages, see the instructions for your income tax return

If you have suggestions for making this form simpler, we would be happy to hear from you. See the instructions for your income tax return.



New York State Department of Taxation and Finance

IT-2104

Employee's Withholding Allowance Certificate

New York State • New York City • Yonkers

First name and middle initial	Last name		Your social security number
Permanent home address (number and street or rural route)		Apartment number	Single or Head of household Married Married Married, but withhold at higher single rate
City, village, or post office	State	ZIP code	Note: If married but legally separated, mark an X in the <i>Single or Head of household</i> box.
Are you a resident of New York City? Yes Are you a resident of Yonkers?	□ No □		
1 Total number of allowances you are claiming for 2 Total number of allowances for New York City (or New York State and Y		, ,
Use lines 3, 4, and 5 below to have additional	withholding per pay p	eriod under special	agreement with your employer.
3 New York State amount			
4 New York City amount			
I certify that I am entitled to the number of withhole Employee's signature Penalty – A penalty of \$500 may be imposed for a from your wages. You may also be subject to criminal to the number of withhole in the number of wit	any false statement you		Date the amount of money you have withheld
Employee: detach this page and give it to your	employer; keep a cop	by for your records.	
Employers only: Mark an X in box A and/or box E	3 to indicate why you ar	e sending a copy of th	nis form to New York State (see instr.):
A Employee claimed more than 14 exemption allo	owances for NYS	А	
B Employee is a new hire or a rehire B Fi	irst date employee perform	med services for pay (mi	m-dd-yyyy) (see instr.):
Are dependent health insurance benefits ava	ilable for this employee	?Yes	No 🗌
If Yes, enter the date the employee qualifies	(mm-dd-yyyy):		
Employer's name and address (Employer: complete this section only	if you are sending a copy of this fo	m to the NYS Tax Department.)	Employer identification number

Instructions

Changes effective for 2013

Form IT-2104 has been revised for tax year 2013. The worksheet on page 3 used to compute your withholding allowances and the charts beginning on page 4 used to enter an additional dollar amount of withholding have been revised. If you previously filed a Form IT-2104 and used the worksheet or charts, you should complete a new 2013 Form IT-2104 and give it to your employer.

Who should file this form

This certificate, Form IT-2104, is completed by an employee and given to the employer to instruct the employer how much New York State (and New York City and Yonkers) tax to withhold from the employee's pay. The more allowances claimed, the lower the amount of tax withheld.

If you do not file Form IT-2104, your employer may use the same number of allowances you claimed on federal Form W-4. Due to differences in tax law, this may result in the wrong amount of tax withheld for New York State, New York City, and Yonkers. Complete Form IT-2104 each year and file it with your employer if the number of allowances you may claim

is different from federal Form W-4 or has changed. Common reasons for completing a new Form IT-2104 each year include the following:

- · You started a new job.
- You are no longer a dependent.
- Your individual circumstances may have changed (for example, you were married or have an additional child).
- You itemize your deductions on your personal income tax return.
- · You claim allowances for New York State credits.
- You owed tax or received a large refund when you filed your personal income tax return for the past year.
- Your wages have increased and you expect to earn \$102,900 or more during the tax year.
- The total income of you and your spouse has increased to \$102,900 or more for the tax year.
- You have significantly more or less income from other sources or from another job.
- You no longer qualify for exemption from withholding.
- You have been advised by the Internal Revenue Service that you are entitled to fewer allowances than claimed on your original federal Form W-4, and the disallowed allowances were claimed on your original Form IT-2104.

Page 2 of 7 IT-2104 (2013)

Exemption from withholding

You cannot use Form IT-2104 to claim exemption from withholding. To claim exemption from income tax withholding, you **must** file Form IT-2104-E, *Certificate of Exemption from Withholding*, with your employer. You must file a new certificate each year that you qualify for exemption. This exemption from withholding is allowable only if you had no New York income tax liability in the prior year, you expect none in the current year, **and** you are over 65 years of age, under 18, or a full-time student under 25. You may also claim exemption from withholding if you are a military spouse and meet the conditions set forth under the Servicemembers Civil Relief Act as amended by the Military Spouses Residency Relief Act. If you are a dependent who is under 18 or a full-time student, you may owe tax if your income is more than \$3,050.

Withholding allowances

You may **not** claim a withholding allowance for yourself or, if married, your spouse. Claim the number of withholding allowances you compute in Part 1 and Part 3 on page 3 of this form. If you want more tax withheld, you may claim fewer allowances. **If you claim more than 14 allowances**, your employer **must send** a copy of your **Form IT-2104** to the New York State Tax Department. You may then be asked to verify your allowances. If you arrive at negative allowances (less than zero) on lines 1 or 2 and your employer cannot accommodate negative allowances, **enter 0** and see *Additional dollar amount(s)* below.

Income from sources other than wages – If you have more than \$1,000 of income from sources other than wages (such as interest, dividends, or alimony received), reduce the number of allowances claimed on line 1 and line 2 (if applicable) of the IT-2104 certificate by one for each \$1,000 of nonwage income. If you arrive at negative allowances (less than zero), see Withholding allowances above. You may also consider filling estimated tax, especially if you have significant amounts of nonwage income. Estimated tax requires that payments be made by the employee directly to the Tax Department on a quarterly basis. For more information, see the instructions for Form IT-2105, Estimated Income Tax Payment Voucher for Individuals, or see Need help? on page 6.

Other credits (Worksheet line 13) – If you will be eligible to claim any credits other than the credits listed in the worksheet, such as an investment tax credit, you may claim additional allowances.

Find your filing status and your New York adjusted gross income (NYAGI) in the chart below, and divide the amount of the expected credit by the number indicated. Enter the result (rounded to the nearest whole number) on line 13.

Single and NYAGI is:	Head of household and NYAGI is:	Married and NYAGI is:	Divide amount of expected credit by:
Less than	Less than	Less than	66
\$205,850	\$257,300	\$308,750	
Between	Between	Between	68
\$205,850 and	\$257,300 and	\$308,750 and	
\$1,029,250	\$1,543,900	\$2,058,550	
Over	Over	Over	88
\$1,029,250	\$1,543,900	\$2,058,550	

Example: You are married and expect your New York adjusted gross income to be less than \$308,750. In addition, you expect to receive a flow-through of an investment tax credit from the S corporation of which you are a shareholder. The investment tax credit will be \$160. Divide the expected credit by 66. 160/66 = 2.4242. The additional withholding allowance(s) would be 2. Enter **2** on line 13.

Married couples with both spouses working – If you and your spouse both work, you should each file a separate IT-2104 certificate with your respective employers. Your withholding will better match your total tax if the higher wage-earning spouse claims all of the couple's allowances and the lower wage-earning spouse claims zero allowances. Do not claim more total allowances than you are entitled to. If your combined wages

- less than \$102,900, you should each mark an X in the box Married, but withhold at higher single rate on the certificate front, and divide the total number of allowances that you compute on line 17 and line 28 (if applicable) between you and your working spouse.
- \$102,900 or more, use the chart(s) in Part 4 and enter the additional withholding dollar amount on line 3.

Taxpayers with more than one job – If you have more than one job, file a separate IT-2104 certificate with each of your employers. Be sure to claim only the total number of allowances that you are entitled to. Your withholding will better match your total tax if you claim all of your allowances at your higher-paying job and zero allowances at the lower-paying job. In addition, to make sure that you have enough tax withheld, if you are a single taxpayer or head of household with two or more jobs, and your combined wages from all jobs are under \$102,900, reduce the number of allowances by seven on line 1 and line 2 (if applicable) on the certificate you file with your higher-paying job employer. If you arrive at negative allowances (less than zero), see Withholding allowances above.

If you are a single or a head of household taxpayer, and your combined wages from all of your jobs are between \$102,900 and \$2,161,527, use the chart(s) in Part 5 and enter the additional withholding dollar amount from the chart on line 3.

If you are a married taxpayer, and your combined wages from all of your jobs are \$102,900 or more, use the chart(s) in Part 4 and enter the additional withholding dollar amount from the chart on line 3 (Substitute the words *Higher-paying job* for *Higher earner's wages* within the chart).

Dependents – If you are a dependent of another taxpayer and expect your income to exceed \$3,050, you should reduce your withholding allowances by one for each \$1,000 of income over \$2,500. This will ensure that your employer withholds enough tax.

Following the above instructions will help to ensure that you will not owe additional tax when you file your return.

Heads of households with only one job – If you will use the head-of-household filing status on your state income tax return, mark the *Single or Head of household* box on the front of the certificate. If you have only one job, you may also wish to claim two additional withholding allowances on line 14.

Additional dollar amount(s)

You may ask your employer to withhold an additional dollar amount each pay period by completing lines 3, 4, and 5 on Form IT-2104. In most instances, if you compute a negative number of allowances and your employer cannot accommodate a negative number, for each negative allowance claimed you should have an additional \$1.85 of tax withheld per week for New York State withholding on line 3, and an additional \$0.80 of tax withheld per week for New York City withholding on line 4. Yonkers residents should use 15% (.15) of the New York State amount for additional withholding for Yonkers on line 5.

Note: If you are requesting your employer to withhold an additional dollar amount on lines 3, 4, or 5 of this allowance certificate, the additional dollar amount, as determined by these instructions or by using the chart(s) in Part 4 or Part 5, is accurate for a weekly payroll. Therefore, if you are not paid on a weekly basis, you will need to adjust the dollar amount(s) that you compute. For example, if you are paid biweekly, you must double the dollar amount(s) computed.

Avoid underwithholding

Form IT-2104, together with your employer's withholding tables, is designed to ensure that the correct amount of tax is withheld from your pay. If you fail to have enough tax withheld during the entire year, you may owe a large tax liability when you file your return. The Tax Department must assess interest and may impose penalties in certain situations in addition to the tax liability. Even if you do not file a return, we may determine that you owe personal income tax, and we may assess interest and penalties on the amount of tax that you should have paid during the year.

(continued)

Employers

Box A – If you are required to submit a copy of an employee's Form IT-2104 to the Tax Department because the employee claimed more than 14 allowances, mark an *X* in box A and send a copy of Form IT-2104 to: **NYS Tax Department, Income Tax Audit Administrator, Withholding Certificate Coordinator, W A Harriman Campus, Albany NY 12227**.

Due dates for sending certificates received from employees claiming more than 14 allowances are:

Quarter	Due date	Quarter	Due date
January - March	April 30	July – September	October 31
April – June	July 31	October – December	January 31

Box B – If you are submitting a copy of this form to comply with New York State's New Hire Reporting Program, mark an X in box B. Enter the first day any services are performed for which the employee will be paid wages, commissions, tips and any other type of compensation. For services based solely on commissions, this is the first day an employee working for commissions is eligible to earn commissions. Also, mark an X in the Yes or No box indicating if dependent health insurance benefits are available to this employee. If Yes, enter the date the employee qualifies for coverage. Mail the completed form, within 20 days of hiring, to: NYS Tax Department, New Hire Notification, PO Box 15119, Albany NY 12212-5119. To report newly-hired or rehired employees online instead of submitting this form, go to www.nynewhire.com.

Worksheet

See the instructions before completing this worksheet.

Part 1 - Complete this part to compute your withholding allowances for New York State and Yonkers (line 1).

Part	i – Complete this part to compute your withholding allowances for New York State and Yonkers	(line 1).
6	Enter the number of dependents that you will claim on your state return (do not include yourself or, if married, your spouse)	6
For li	nes 7, 8, and 9, enter 1 for each credit you expect to claim on your state return.	
7	College tuition credit	7
8	New York State household credit	8
9	Real property tax credit	9
For li	nes 10, 11, and 12, enter 3 for each credit you expect to claim on your state return.	
10	Child and dependent care credit	10
11	Earned income credit	11
12	Empire State child credit	12
13	Other credits (see instructions)	13
14	Head of household status and only one job (enter 2 if the situation applies)	14
15	Enter an estimate of your federal adjustments to income, such as alimony you will pay for the tax year	
	and deductible IRA contributions you will make for the tax year. Total estimate \$	
	Divide this estimate by \$1,000. Drop any fraction and enter the number	15
16	If you expect to itemize deductions on your state tax return, complete Part 2 below and enter the number from line 25.	
	All others enter 0	16
17	Add lines 6 through 16. Enter the result here and on line 1. If you have more than one job, or if you and your spouse both	
	work, see instructions for Taxpayers with more than one job and Married couples with both spouses working	17
Part 2	2 – Complete this part only if you expect to itemize deductions on your state return.	
18	Enter your estimated federal itemized deductions for the tax year	18
	Enter your estimated state, local, and foreign income taxes or state and local general sales taxes included on line 18	
	Subtract line 19 from line 18	
	Enter your estimated college tuition itemized deduction	
	Add lines 20 and 21	
	Based on your federal filing status, enter the applicable amount from the table below	
	Standard deduction table	
	Single (cannot be claimed as a dependent) \$ 7,700 Qualifying widow(er) \$15,400	
	Single (can be claimed as a dependent) \$ 3,050 Married filing jointly \$15,400	
	Head of household	
24	Subtract line 23 from line 22 (if line 23 is larger than line 22, enter 0 here and on line 16 above)	24
	Divide line 24 by \$1,000. Drop any fraction and enter the result here and on line 16 above	
	2 2 2 1 2 2 2 2 2 2	
Part :	3 - Complete this part to compute your withholding allowances for New York City (line 2).	
26	Enter the amount from line 6 above	26
27	Add lines 14 through 16 above and enter total here	. 27
28	Add lines 26 and 27. Enter the result here and on line 2	. 28

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Part 4 – These charts are only for married couples with both spouses working or married couples with one spouse working more than one job, and whose combined wages are between \$102,900 and \$2,161,527.

Enter the additional withholding dollar amount on line 3.

The additional dollar amount, as shown below, is accurate for a weekly payroll. If you are not paid on a weekly basis, you will need to adjust these dollar amount(s). For example, if you are paid biweekly, you must double the dollar amount(s) computed.

Higher earne	er's wages	\$102,900 \$123,499	\$123,500 \$144,099								, ,	\$463,150 \$514,599
\$51,450	\$72,049	\$11	\$15									
\$72,050	\$92,599	\$11	\$16	\$21	\$26							
\$92,600	\$113,199	\$7	\$14	\$19	\$26	\$33						
\$113,200	\$123,499	\$2	\$10	\$15	\$22	\$31	\$30					
\$123,500	\$133,799		\$4	\$13	\$19	\$29	\$28					
\$133,800	\$144,099		\$2	\$10	\$17	\$26	\$28	\$25				
\$144,100	\$154,349			\$4	\$14	\$24	\$28	\$23				
\$154,350	\$164,649			\$2	\$11	\$21	\$26	\$23	\$21			
\$164,650	\$185,249				\$4	\$16	\$21	\$22	\$21	\$18		
\$185,250	\$226,399					\$6	\$12	\$17	\$20	\$18	\$18	
\$226,400	\$267,599						\$6	\$12	\$23	\$24	\$18	\$17
\$267,600	\$308,749							\$6	\$17	\$29	\$25	\$18
\$308,750	\$360,249								\$10	\$19	\$26	\$22
\$360,250	\$411,699									\$8	\$15	\$22
\$411,700	\$463,149										\$8	\$15
\$463,150	\$514,599											\$8

				\$667,549 \$668,999 \$720,499 \$771,949 \$823,399 \$874,899 \$926,349 \$977,799 \$1,029,249 \$1,080,749 \$1,132,199 \$16									
Higher earn	er's wages	\$514,600 \$566,099	\$566,100 \$617,549	. ,									
\$267,600	\$308,749	\$19	\$16										
\$308,750	\$360,249	\$14	\$16	\$18	\$14								
\$360,250	\$411,699	\$18	\$10	\$12	\$14	\$6	\$6						
\$411,700	\$463,149	\$22	\$18	\$10	\$12	\$14	\$6	\$6	\$6				
\$463,150	\$514,599	\$15	\$22	\$18	\$10	\$12	\$14	\$6	\$6	\$6	\$6		
\$514,600	\$566,099	\$8	\$15	\$22	\$18	\$10	\$12	\$14	\$6	\$6	\$6	\$8	\$11
\$566,100	\$617,549		\$8	\$15	\$22	\$18	\$10	\$12	\$14	\$6	\$6	\$8	\$11
\$617,550	\$668,999			\$8	\$15	\$22	\$18	\$10	\$12	\$14	\$6	\$8	\$11
\$669,000	\$720,499				\$8	\$15	\$22	\$18	\$10	\$12	\$14	\$8	\$11
\$720,500	\$771,949					\$8	\$15	\$22	\$18	\$10	\$12	\$16	\$11
\$771,950	\$823,399						\$8	\$15	\$22	\$18	\$10	\$14	\$19
\$823,400	\$874,899							\$8	\$15	\$22	\$18	\$12	\$17
\$874,900	\$926,349								\$8	\$15	\$22	\$19	\$15
\$926,350	\$977,799									\$8	\$15	\$23	\$22
\$977,800	\$1,029,249										\$8	\$17	\$26
\$1,029,250	\$1,080,749											\$8	\$18
\$1,080,750	\$1,132,199												\$8

			C	ombine	d wages	between	\$1,132,2	200 and \$	1,646,84	9	
Higher earn	er's wages	\$1,132,200 \$1,183,649	\$1,183,650 \$1,235,149	\$1,235,150 \$1,286,599	\$1,286,600 \$1,338,049	\$1,338,050 \$1,389,549	\$1,389,550 \$1,440,999	\$1,441,000 \$1,492,449	\$1,492,450 \$1,543,899	\$1,543,900 \$1,595,399	\$1,595,400 \$1,646,849
\$566,100	\$617,549	\$14	\$17								
\$617,550	\$668,999	\$14	\$17	\$20	\$23						
\$669,000	\$720,499	\$14	\$17	\$20	\$23	\$26	\$29				
\$720,500	\$771,949	\$14	\$17	\$20	\$23	\$26	\$29	\$32	\$35		
\$771,950	\$823,399	\$14	\$17	\$20	\$23	\$26	\$29	\$32	\$35	\$38	\$41
\$823,400	\$874,899	\$22	\$17	\$20	\$23	\$26	\$29	\$32	\$35	\$38	\$41
\$874,900	\$926,349	\$20	\$25	\$20	\$23	\$26	\$29	\$32	\$35	\$38	\$41
\$926,350	\$977,799	\$18	\$23	\$28	\$23	\$26	\$29	\$32	\$35	\$38	\$41
\$977,800	\$1,029,249	\$25	\$21	\$26	\$31	\$26	\$29	\$32	\$35	\$38	\$41
\$1,029,250	\$1,080,749	\$28	\$26	\$22	\$27	\$32	\$27	\$30	\$33	\$36	\$39
\$1,080,750	\$1,132,199	\$18	\$28	\$26	\$22	\$27	\$32	\$27	\$30	\$33	\$36
\$1,132,200	\$1,183,649	\$8	\$18	\$28	\$26	\$22	\$27	\$32	\$27	\$30	\$33
\$1,183,650	\$1,235,149		\$8	\$18	\$28	\$26	\$22	\$27	\$32	\$27	\$30
\$1,235,150	\$1,286,599			\$8	\$18	\$28	\$26	\$22	\$27	\$32	\$27
\$1,286,600	\$1,338,049				\$8	\$18	\$28	\$26	\$22	\$27	\$32
\$1,338,050	\$1,389,549					\$8	\$18	\$28	\$26	\$22	\$27
\$1,389,550	\$1,440,999						\$8	\$18	\$28	\$26	\$22
\$1,441,000	\$1,492,449							\$8	\$18	\$28	\$26
\$1,492,450	\$1,543,899								\$8	\$18	\$28
\$1,543,900	\$1,595,399									\$8	\$18
\$1,595,400	\$1,646,849										\$8

			C	ombine	d wages	between	\$1,646,8	50 and \$	2,161,52	7	
Higher earn	er's wages		\$1,698,300 \$1,749,799								
\$823,400	\$874,899	\$43	\$46								
\$874,900	\$926,349	\$43	\$46	\$49	\$52						
\$926,350	\$977,799	\$43	\$46	\$49	\$52	\$55	\$58				
\$977,800	\$1,029,249	\$43	\$46	\$49	\$52	\$55	\$58	\$61	\$64		
\$1,029,250	\$1,080,749	\$42	\$45	\$48	\$51	\$54	\$57	\$60	\$63	\$466	\$875
\$1,080,750	\$1,132,199	\$39	\$42	\$45	\$48	\$51	\$54	\$57	\$60	\$463	\$875
\$1,132,200	\$1,183,649	\$36	\$39	\$42	\$45	\$48	\$51	\$54	\$57	\$460	\$872
\$1,183,650	\$1,235,149	\$33	\$36	\$39	\$42	\$45	\$48	\$51	\$54	\$457	\$870
\$1,235,150	\$1,286,599	\$30	\$33	\$36	\$39	\$42	\$45	\$48	\$51	\$454	\$867
\$1,286,600	\$1,338,049	\$27	\$30	\$33	\$36	\$39	\$42	\$45	\$48	\$451	\$864
\$1,338,050	\$1,389,549	\$32	\$27	\$30	\$33	\$36	\$39	\$42	\$45	\$448	\$861
\$1,389,550	\$1,440,999	\$27	\$32	\$27	\$30	\$33	\$36	\$39	\$42	\$445	\$858
\$1,441,000	\$1,492,449	\$22	\$27	\$32	\$27	\$30	\$33	\$36	\$39	\$442	\$855
\$1,492,450	\$1,543,899	\$26	\$22	\$27	\$32	\$27	\$30	\$33	\$36	\$439	\$852
\$1,543,900	\$1,595,399	\$28	\$26	\$22	\$27	\$32	\$27	\$30	\$33	\$436	\$849
\$1,595,400	\$1,646,849	\$18	\$28	\$26	\$22	\$27	\$32	\$27	\$30	\$433	\$846
\$1,646,850	\$1,698,299	\$8	\$18	\$28	\$26	\$22	\$27	\$32	\$27	\$430	\$843
\$1,698,300	\$1,749,799		\$8	\$18	\$28	\$26	\$22	\$27	\$32	\$427	\$840
\$1,749,800	\$1,801,249			\$8	\$18	\$28	\$26	\$22	\$27	\$432	\$837
\$1,801,250	\$1,852,699				\$8	\$18	\$28	\$26	\$22	\$427	\$842
\$1,852,700	\$1,904,199					\$8	\$18	\$28	\$26	\$422	\$837
\$1,904,200	\$1,955,649						\$8	\$18	\$28	\$426	\$832
\$1,955,650	\$2,007,099							\$8	\$18	\$428	\$836
\$2,007,100	\$2,058,549								\$8	\$418	\$837
\$2,058,550	\$2,110,049									\$208	\$428
\$2,110,050	\$2,161,527										\$13

Note: These charts do not account for additional withholding in the following instances:

- a married couple with both spouses working, where one spouse's wages are more than \$1,080,763.50 but less than \$2,161,257, and the other spouse's wages are also more than \$1,080,763.50 but less than \$2,161,257;
- married taxpayers with only one spouse working, and that spouse works more than one job, with wages from each job under \$2,161,257, but combined wages from all jobs is over \$2,161,257.

If you are in one of these situations and you would like to request an additional dollar amount of withholding from your wages, please contact the Tax Department for assistance (see *Need help?* on page 6).

Part 5 – These charts are only for single taxpayers and head of household taxpayers with more than one job, and whose combined wages are between \$102,900 and \$2,161,527.

Enter the additional withholding dollar amount on line 3.

The additional dollar amount, as shown below, is accurate for a weekly payroll. If you are not paid on a weekly basis, you will need to adjust these dollar amount(s). For example, if you are paid biweekly, you must double the dollar amount(s) computed.

				Con	nbined w	ages be	tween \$1	02,900 a	nd \$514,	599		
Higher v	vage	\$102,900 \$123,499	\$123,500 \$144,099	\$144,100 \$164,649	\$164,650 \$185,249	\$185,250 \$226,399	\$226,400 \$267,599	\$267,600 \$308,749	\$308,750 \$360,249	\$360,250 \$411,699	\$411,700 \$463,149	\$463,150 \$514,599
\$51,450	\$72,049	\$12	\$17									
\$72,050	\$92,599	\$12	\$19	\$25	\$25							
\$92,600	\$113,199	\$8	\$16	\$22	\$25	\$26						
\$113,200	\$123,499	\$2	\$11	\$18	\$20	\$24	\$27					
\$123,500	\$133,799		\$4	\$14	\$17	\$21	\$27					
\$133,800	\$144,099		\$2	\$11	\$14	\$18	\$27	\$25				
\$144,100	\$154,349			\$4	\$11	\$15	\$27	\$23				
\$154,350	\$164,649			\$2	\$8	\$13	\$26	\$24	\$20			
\$164,650	\$185,249				\$3	\$10	\$24	\$27	\$21	\$23		
\$185,250	\$226,399					\$8	\$20	\$28	\$26	\$23	\$17	
\$226,400	\$267,599						\$8	\$15	\$23	\$18	\$17	\$12
\$267,600	\$308,749							\$6	\$14	\$21	\$15	\$16
\$308,750	\$360,249								\$8	\$15	\$21	\$14
\$360,250	\$411,699									\$8	\$15	\$21
\$411,700	\$463,149										\$8	\$15
\$463,150	\$514,599											\$8

			Combined wages between \$514,600 and \$1,132,199										
Higher	wage	\$514,600 \$566,099	\$566,100 \$617,549	\$617,550 \$668,999	\$669,000 \$720,499	\$720,500 \$771,949	\$771,950 \$823,399	\$823,400 \$874,899	\$874,900 \$926,349	\$926,350 \$977,799		\$1,029,250 \$1,080,749	
\$267,600	\$308,749	\$9	\$8										
\$308,750	\$360,249	\$16	\$8	\$8	\$8								
\$360,250	\$411,699	\$14	\$16	\$8	\$8	\$8	\$8						
\$411,700	\$463,149	\$21	\$14	\$16	\$8	\$8	\$8	\$8	\$8				
\$463,150	\$514,599	\$15	\$21	\$14	\$16	\$8	\$8	\$8	\$8	\$8	\$8		
\$514,600	\$566,099	\$8	\$15	\$21	\$14	\$16	\$8	\$8	\$8	\$8	\$8	\$214	\$432
\$566,100	\$617,549		\$8	\$15	\$21	\$14	\$16	\$8	\$8	\$8	\$8	\$214	\$432
\$617,550	\$668,999			\$8	\$15	\$21	\$14	\$16	\$8	\$8	\$8	\$214	\$432
\$669,000	\$720,499				\$8	\$15	\$21	\$14	\$16	\$8	\$8	\$214	\$432
\$720,500	\$771,949					\$8	\$15	\$21	\$14	\$16	\$8	\$214	\$432
\$771,950	\$823,399						\$8	\$15	\$21	\$14	\$16	\$214	\$432
\$823,400	\$874,899							\$8	\$15	\$21	\$14	\$222	\$432
\$874,900	\$926,349								\$8	\$15	\$21	\$220	\$440
\$926,350	\$977,799									\$8	\$15	\$228	\$438
\$977,800	\$1,029,249										\$8	\$222	\$445
\$1,029,250	\$1,080,749											\$111	\$233
\$1,080,750	\$1,132,199												\$13

(Part 5 continued on page 7)

Privacy notification

The Commissioner of Taxation and Finance may collect and maintain personal information pursuant to the New York State Tax Law, including but not limited to, sections 5-a, 171, 171-a, 287, 308, 429, 475, 505, 697, 1096, 1142, and 1415 of that Law; and may require disclosure of social security numbers pursuant to 42 USC 405(c)(2)(C)(i).

This information will be used to determine and administer tax liabilities and, when authorized by law, for certain tax offset and exchange of tax information programs as well as for any other lawful purpose.

Information concerning quarterly wages paid to employees is provided to certain state agencies for purposes of fraud prevention, support enforcement, evaluation of the effectiveness of certain employment and training programs and other purposes authorized by law.

Failure to provide the required information may subject you to civil or criminal penalties, or both, under the Tax Law.

This information is maintained by the Manager of Document Management, NYS Tax Department, W A Harriman Campus, Albany NY 12227; telephone (518) 457-5181.

Need help?



Visit our Web site at www.tax.ny.gov

- · get information and manage your taxes online
- · check for new online services and features

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Telephone assistance

Automated income tax refund status: (518) 457-5149

Personal Income Tax Information Center: (518) 457-5181

To order forms and publications: (518) 457-5431

Text Telephone (TTY) Hotline (for persons with

hearing and speech disabilities using a TTY): (518) 485-5082

		Combined wages between \$1,132,200 and \$1,646,849									
Higher	wage	\$1,132,200 \$1,183,649	\$1,183,650 \$1,235,149	\$1,235,150 \$1,286,599	\$1,286,600 \$1,338,049	\$1,338,050 \$1,389,549	\$1,389,550 \$1,440,999	\$1,441,000 \$1,492,449	\$1,492,450 \$1,543,899	\$1,543,900 \$1,595,399	\$1,595,400 \$1,646,849
\$566,100	\$617,549	\$455	\$477								
\$617,550	\$668,999	\$455	\$477	\$499	\$522						
\$669,000	\$720,499	\$454	\$477	\$499	\$522	\$544	\$567				
\$720,500	\$771,949	\$455	\$477	\$499	\$522	\$544	\$567	\$589	\$612		
\$771,950	\$823,399	\$455	\$477	\$499	\$522	\$544	\$567	\$589	\$612	\$634	\$657
\$823,400	\$874,899	\$455	\$477	\$499	\$522	\$544	\$567	\$589	\$612	\$634	\$657
\$874,900	\$926,349	\$454	\$477	\$499	\$522	\$544	\$567	\$589	\$612	\$634	\$657
\$926,350	\$977,799	\$462	\$477	\$499	\$522	\$544	\$567	\$589	\$612	\$634	\$657
\$977,800	\$1,029,249	\$460	\$485	\$499	\$522	\$544	\$567	\$589	\$612	\$634	\$657
\$1,029,250	\$1,080,749	\$261	\$277	\$301	\$316	\$338	\$360	\$383	\$405	\$428	\$450
\$1,080,750	\$1,132,199	\$38	\$66	\$81	\$106	\$120	\$143	\$165	\$188	\$210	\$233
\$1,132,200	\$1,183,649	\$13	\$38	\$66	\$81	\$106	\$120	\$143	\$165	\$188	\$210
\$1,183,650	\$1,235,149		\$13	\$38	\$66	\$81	\$106	\$120	\$143	\$165	\$188
\$1,235,150	\$1,286,599			\$13	\$38	\$66	\$81	\$106	\$120	\$143	\$165
\$1,286,600	\$1,338,049				\$13	\$38	\$66	\$81	\$106	\$120	\$143
\$1,338,050	\$1,389,549					\$13	\$38	\$66	\$81	\$106	\$120
\$1,389,550	\$1,440,999						\$13	\$38	\$66	\$81	\$106
\$1,441,000	\$1,492,449							\$13	\$38	\$66	\$81
\$1,492,450	\$1,543,899								\$13	\$38	\$66
\$1,543,900	\$1,595,399									\$13	\$38
\$1,595,400	\$1,646,849										\$13

			С	ombined	d wages	between	\$1,646,8	50 and \$	2,161,52	7	
Higher	· wage		\$1,698,300 \$1,749,799								
\$823,400	\$874,899	\$679	\$702								
\$874,900	\$926,349	\$679	\$702	\$724	\$747						
\$926,350	\$977,799	\$679	\$702	\$724	\$747	\$769	\$791				
\$977,800	\$1,029,249	\$679	\$702	\$724	\$747	\$769	\$791	\$814	\$836		
\$1,029,250	\$1,080,749	\$473	\$495	\$518	\$540	\$563	\$585	\$608	\$630	\$652	\$262
\$1,080,750	\$1,132,199	\$255	\$278	\$300	\$323	\$345	\$368	\$390	\$413	\$435	\$457
\$1,132,200	\$1,183,649	\$233	\$255	\$278	\$300	\$323	\$345	\$368	\$390	\$412	\$435
\$1,183,650	\$1,235,149	\$210	\$233	\$255	\$278	\$300	\$323	\$345	\$368	\$390	\$412
\$1,235,150	\$1,286,599	\$188	\$210	\$233	\$255	\$278	\$300	\$323	\$345	\$368	\$390
\$1,286,600	\$1,338,049	\$165	\$188	\$210	\$233	\$255	\$278	\$300	\$323	\$345	\$368
\$1,338,050	\$1,389,549	\$143	\$165	\$188	\$210	\$233	\$255	\$278	\$300	\$323	\$345
\$1,389,550	\$1,440,999	\$120	\$143	\$165	\$188	\$210	\$233	\$255	\$278	\$300	\$323
\$1,441,000	\$1,492,449	\$106	\$120	\$143	\$165	\$188	\$210	\$233	\$255	\$278	\$300
\$1,492,450	\$1,543,899	\$81	\$106	\$120	\$143	\$165	\$188	\$210	\$233	\$255	\$278
\$1,543,900	\$1,595,399	\$66	\$81	\$106	\$120	\$143	\$165	\$188	\$210	\$233	\$255
\$1,595,400	\$1,646,849	\$38	\$66	\$81	\$106	\$120	\$143	\$165	\$188	\$210	\$233
\$1,646,850	\$1,698,299	\$13	\$38	\$66	\$81	\$106	\$120	\$143	\$165	\$188	\$210
\$1,698,300	\$1,749,799		\$13	\$38	\$66	\$81	\$106	\$120	\$143	\$165	\$188
\$1,749,800	\$1,801,249			\$13	\$38	\$66	\$81	\$106	\$120	\$143	\$165
\$1,801,250	\$1,852,699				\$13	\$38	\$66	\$81	\$106	\$120	\$143
\$1,852,700	\$1,904,199					\$13	\$38	\$66	\$81	\$106	\$120
\$1,904,200	\$1,955,649						\$13	\$38	\$66	\$81	\$106
\$1,955,650	\$2,007,099							\$13	\$38	\$66	\$81
\$2,007,100	\$2,058,549								\$13	\$38	\$66
\$2,058,550	\$2,110,049									\$13	\$38
\$2,110,050	\$2,161,527										\$13

College: Herbert H. Lehman

DESIGNATION OF BENEFICIARY

(Non-Instructional Staff)

	Name - Please Print		Social Security Number	
			CUNY	
	Title	AND PROPERTY OF THE PROPERTY O	Agency	
		ACCIDENTAL DEATH BENEFIT		
1.	In accordance with the provisions of \$25,000 provided for therein is to be			
	NAME OF BENEFICIARY (IES)	RELATIONSHIP	ADDRESS	% OF BENEFIT
1)				
2)		~ *		
3)				=
4)	If none of the above-designated bene	eficiaries shall survive me, payme	ent shall be made to my estate.	
	UNUSED ANNU	AL LEAVE AND ACCRUED OVER	RTIME BENEFIT	
	payment for the accrued annual leave following beneficiary or beneficiaries you desire to name a beneficiary other	or to my estate as indicated belo		below if
	NAME OF BENEFICIARY (IES)	RELATIONSHIP	ADDRESS	% OF BENEFIT
1)				
2)				
3)				
	If none of the above-designated bene		ent shall be made to my estate	
4)	Il floric of the above-acsignated bene	eficiaries shall survive me, payme	one onan bo mado to my cotato.	
ALL F	PREVIOUS DESIGNATED BENEFICIARE UPON MY DEATH BE MADE SPECIFIE	ES ARE HEREBY CANCELLED AT		NTS BE
ALL P	PREVIOUS DESIGNATED BENEFICIARE	ES ARE HEREBY CANCELLED AT		NTS BE
ALL P MADE	PREVIOUS DESIGNATED BENEFICIARE UPON MY DEATH BE MADE SPECIFIE	ES ARE HEREBY CANCELLED AT	ND IT IS DIRECTED THAT PAYME	NTS BE
ALL P MADE Signa	PREVIOUS DESIGNATED BENEFICIARE UPON MY DEATH BE MADE SPECIFIE Sture of Employee (DO NOT PRINT)	ES ARE HEREBY CANCELLED AT	Address of Employee	NTS BE

NOTE: IT IS YOUR RESPONSIBILITY TO SUBMIT A NEW DESIGNATION OF BENEFICIARY WHENEVER CHANGING PERSONAL CIRCUMSTANCES MAKE A CHANGE IN BENEFICIARY NECESSARY.

You must come to
Human Resources
in Shuster Hall Room
230 to fill out an I-9
Form within three days
of your start date.

Please see attached list of approved documentation.

LISTS OF ACCEPTABLE DOCUMENTS All documents must be UNEXPIRED

Employees may present one selection from List A or a combination of one selection from List B and one selection from List C.

	LIST A Documents that Establish Both Identity and Employment Authorization	OR	LIST B Documents that Establish Identity AN	ID	LIST C Documents that Establish Employment Authorization
	U.S. Passport or U.S. Passport Card Permanent Resident Card or Alien Registration Receipt Card (Form I-551)		Driver's license or ID card issued by a State or outlying possession of the United States provided it contains a photograph or information such as name, date of birth, gender, height, eye	1.	A Social Security Account Number card, unless the card includes one of the following restrictions: (1) NOT VALID FOR EMPLOYMENT
3.	Foreign passport that contains a temporary I-551 stamp or temporary I-551 printed notation on a machine-readable immigrant visa		color, and address D card issued by federal, state or local government agencies or entities,		(2) VALID FOR WORK ONLY WITH INS AUTHORIZATION(3) VALID FOR WORK ONLY WITH DHS AUTHORIZATION
4.	Employment Authorization Document that contains a photograph (Form I-766)		provided it contains a photograph or information such as name, date of birth, gender, height, eye color, and address	2.	Certification of Birth Abroad issued by the Department of State (Form FS-545)
5.	For a nonimmigrant alien authorized to work for a specific employer because of his or her status:		School ID card with a photograph Voter's registration card	3.	Certification of Report of Birth issued by the Department of State (Form DS-1350)
	a. Foreign passport; andb. Form I-94 or Form I-94A that has the following:(1) The same name as the passport;	-	 U.S. Military card or draft record Military dependent's ID card U.S. Coast Guard Merchant Mariner Card 	4.	Original or certified copy of birth certificate issued by a State, county, municipal authority, or territory of the United States bearing an official seal
	and (2) An endorsement of the alien's		8. Native American tribal document	5.	
	nonimmigrant status as long as that period of endorsement has	9.	9. Driver's license issued by a Canadian government authority	6.	U.S. Citizen ID Card (Form I-197)
	not yet expired and the proposed employment is not in conflict with any restrictions or limitations identified on the form.		For persons under age 18 who are unable to present a document listed above:		Identification Card for Use of Resident Citizen in the United States (Form I-179)
6.	Passport from the Federated States of Micronesia (FSM) or the Republic of the Marshall Islands (RMI) with Form I-94 or Form I-94A indicating nonimmigrant admission under the		10. School record or report card11. Clinic, doctor, or hospital record12. Day-care or nursery school record	8.	Employment authorization document issued by the Department of Homeland Security
	Compact of Free Association Between the United States and the FSM or RMI				

Illustrations of many of these documents appear in Part 8 of the Handbook for Employers (M-274).

Refer to Section 2 of the instructions, titled "Employer or Authorized Representative Review and Verification," for more information about acceptable receipts.

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THE CITY UNIVERSITY OF NEW YORK

LEHMAN COLLEGE WORKPLACE VIOLENCE PREVENTION PROGRAM

In accordance with the University's commitment to the prevention of workplace violence, Lehman College adopts the following as its Workplace Violence Prevention Program (the "Program"):

1. Purpose

The University's Workplace Violence Prevention Program provides information to the College community about preventing and responding to incidents of workplace violence at the College's worksites and facilities and seeks to develop programs which will prevent or reduce the likelihood of threats or acts of workplace violence. The Program seeks to ensure that any incident, complaint, or report of workplace violence is taken seriously and dealt with appropriately. The Program implements the Workplace Violence Prevention Policy adopted by the Board of Trustees on February 28, 2011. As set forth therein, workplace violence is defined as any physical assault or acts of aggressive behavior occurring where an employee performs any work–related duty in the course of his or her employment, including but not limited to:

- i. An attempt or threat, whether verbal or physical, to inflict physical injury upon an employee;
- ii. Any intentional display of force that would give an employee reason to fear or expect bodily harm;
- iii. Intentional and wrongful physical contact with an employee without his or her consent that entails some injury; and
- iv. Stalking an employee in a manner that may cause the employee to fear for his or her physical safety and health when such stalking has arisen through and in the course of employment.

2. Scope

All College employees are required to comply with the Program. In addition, since students and visitors to the College are required to conduct themselves in conformity with existing law, employees who observe or experience students or visitors engaging in violent or threatening behavior should follow the procedures in the Program for reporting such behavior.

3. Workplace Violence Advisory Team ("WVAT")

a. The WVAT reports directly to the College President and consists of members designated by the President.

- b. The WVAT Chair, selected by the President, sets the times and agendas for meetings and establishes sub-committees, as necessary, to fulfill the WVAT responsibilities set forth herein and in sections 4, 7 and 12.
- c. The Chair and members of the WVAT and their contact information are listed in Appendix I.
- d. The WVAT will coordinate the Workplace Violence Prevention training at the Colleges.

4. Risk Assessment and Evaluation Process

- a. On an annual basis, the WVAT will:
 - i. Examine the prior year's relevant records that concern workplace violence incidents to identify patterns in the type and cause of injuries.
 - ii. Assess relevant policies, work practices, and work procedures that may impact the Workplace Violence Prevention Program.
 - iii. Review survey responses received from employees of the College. Survey forms are available to employees on the College's website and in hard-copy at the College's Office of Public Safety and Office of Human Resources. Completed survey forms are to be forwarded to the Director of Public Safety, as the physical site evaluation team leader.
- b. The WVAT will conduct a physical site evaluation of the College's workplace to determine the presence of factors that may place employees at risk of workplace violence. Each authorized employee representative organization with employees at the College will be given advance notice, in writing, from the Vice President for Administration of the date(s) and time(s) of the site visit(s). Each authorized employee organization may designate a representative to participate in the site visit(s) by notifying the WVAT Chair in writing of the designated representative. In addition to the authorized employee representative(s), an employee may also request to participate directly in the site visit for his/her work area by contacting the WVAT Chair. The authorized employee representative(s) will be provided with incident reports (without names) for the previous year. The authorized employee representative(s) may submit to the WVAT Chair any comments regarding situations in the workplace that pose a threat of workplace violence.
- c. Following the physical site evaluation, the WVAT will prepare a report of the findings, including a list of the high risk factors identified during the physical site evaluation and recommendations on appropriate work practice control measures to address identified risk factors. The report will be submitted to the President for appropriate action. Copies of the report will be made available, upon request, to employee(s), their authorized representatives(s), and the New York State Department of Labor.

d. Physical site evaluation/risk assessment evaluations will be conducted after an incident of workplace violence, as needed and as identified by the Department of Labor, or if it is determined that a significant trend of workplace violence is identified.

5. High Risk Locations/Risk Factors

- 1. All employees need to receive training in the Workplace Violence Preventive Planning and Procedure.
- 2. Concerns for our ability to send mass communications of an emergency nature to the immediate college community, such as through Public Address system.
- 3. Lehman should strive for 100% enrollment of the college community into C.U.N.Y. ALERT to ensure notification of emergency situations to all students and staff.
- 4. College locations that handle money, including cash, money orders, checks and credit card receipts: Bursar/Controller Offices; Student Association Services and Performing Arts Centers.
- 5. Locations that handle stressful issues for students, such as the Counseling Center, Library, Registrar, and Academic Advisement and those involved with faculty and staff, such as the office of the Labor Designee and Human Resources.
- 6. Sites where employees work late at night or early in the morning, or on weekends.
- 7. There are no immediate guidelines on what to do if someone is attacked when there is not enough time to call for assistance or go to the website to view emergency procedures.
- 8. Orientation for new faculty members regarding Workplace Violence Prevention is not adequate enough for retention.

• Engineering Controls

- 1. Closed Captioned Television (C.C.T.V.) throughout the campus and in buildings.
- 2. Blue Light Duress Stations in all buildings, on every floor, and throughout the campus for emergency and non-emergency direct communication to the Public Safety Department.
- 3. Mirrors to see around corners and blind spots
- 4. Card access.
- 5. Outside events, student dance will have metal detectors, stationary and wand types.
- 6. New outdoor lighting throughout the campus.
- 7. Bullet resistant glass at the Public Safety Central Command Station, as well as the Bursar's Department and all money-handling locations.

• Administrative/Work Practice Controls

1. Sign In/Sign Out procedures for after hours, weekends and holidays.

- 2. Bicycle Patrol Units scheduled on all shifts.
- 3. K-9 patrol scheduled on the late tour (11:00 pm-7:30 am) for escorts of researchers, and patrols of the buildings and tunnel systems.
- 4. Work Orders to repair broken locks, fence openings, and gates, as well as the removal of debris and clean up of areas that have become attractive to criminals.
- 5. Late tour patrols are directed to lock all basement gates in the tunnels leading from building to building, and to only open those gates when requested, for college related tasks.
- 6. The creation of Emergency Procedure Flip through pamphlets sent to all college departments to facilitate obtaining information on "what-to-do" rather than surfing the web to see policy and procedure.
- 7. The College is conducting research into obtaining a Public Address System to notify the community of an emergency situation throughout the campus.
- 8. The goal of 100% C.U.N.Y. ALERT enrollment will be enhanced with more recruitment through Town Hall meetings, Orientations, Community Alerts and possibly at the three (3) General Faculty Meetings, if approval is granted.
- 9. On-line training is being planned for all employees, and selected members of the college community, with the training set to begin May 2011.

• Personal Protective Equipment

- 1. Walkie-Talkies are utilized in the Public Safety and Buildings and Grounds Departments.
- 2. Cell Phones have been issued to Public Safety, some Buildings and Grounds staff, Administrators and Support staff.
- 3. Emergency and Non-Emergency contact to the Public Safety Department through the Blue Light Duress Stations throughout the College campus.
- 4. Emergency Contact with the Public Safety Department can be obtained through the wall mounted "Red-Phones" and/or by dialing "7777" from any internal telephone.
- 5. There is a security tie-in from off-campus resident housing to the main campus with C.C.T.V., Duress Stations, Alarm systems, Key-Fob for emergency automatic front door opening, with spot light, alarm and C.C.T.V. activation.

Panic Buttons

Panic Buttons are located in the:

- 1. Student Counseling Center
- 2. Student Health Center
- 3. Public Safety Administrative Office
- 4. Bursar's Office

6. Employee Information and Training

All employees must participate in training on the risks of workplace violence in their workplace at the time of initial employment and at least annually thereafter. The employee training and information program includes information regarding how to locate the Policy and Program as well as survey forms.

The College provides training to its employees. The training program addresses the following essential topics:

- a. An overview and definition of workplace violence;
- b. The College's commitment to providing a safe workplace;
- c. Instructions regarding how to obtain a copy of the written Policy and Program;
- d. A listing of significant identified risk factors;
- e. Techniques on how to recognize and avoid potentially violent situations, including deescalation techniques;
- f. How employees can protect themselves and how employees can suggest improvements to the Program;
- g. The importance of reporting incidents and how to report such incidents;
- h. Where employees can seek assistance during a dangerous situation; and
- i. Resources, such as trauma counseling, that may be available to employees after an incident has occurred.

Additional training will be conducted as necessary and as determined by the needs of the College.

7. Reporting Process/Procedures to Report Incidents of Workplace Violence

In order to maintain a safe working environment, incidents of workplace violence must be reported promptly to a supervisor and/or the Office of Public Safety. The phone number of the College's Office of Public Safety is (718) 960-8593. Members of the College community are also encouraged to report other behavior they believe may lead to potential workplace violence. After an incident occurs, or upon receipt of a complaint, an investigation will be conducted by the Office of Public Safety. Complaints involving the Office of Public Safety will be investigated by the Office of Human Resources.

- a. The College will use a form maintained by the University's Office of Public Safety to record incidents of workplace violence. The College Office of Public Safety will maintain all records of initial reports and the results of any investigative reports relating to Workplace Violence at the College. As set forth therein, investigative reports must include:
 - i. Workplace location where the incident occurred;
 - ii. Time of day/shift when the incident occurred;

- iii. A detailed description of the incident, including events leading up to the incident and how the incident ended:
- iv. Names and job titles of employees involved;
- v. Name or other identifier of other individual(s) involved;
- vi. Nature and extent of injuries arising from the incident; and
- vii. Names of witnesses.
- b. The WVAT reviews the investigation results of incidents and complaints, determines whether there is a violation of the Policy and provides a report to the President.
- c. The WVAT, with the participation of the authorized employee representative(s), conducts a review of the Campus Workplace Violence Incidents Report at least annually to identify trends in the types of incidents in the workplace and reviews the effectiveness of the mitigating actions taken.

8. Confidentiality of Certain Information

Nothing in this Program requires the disclosure to any person or entity, other than to the Commissioner of the Department of Labor as directed by the New York State Labor Law, of information otherwise kept confidential for security reasons, such as information that if disclosed may:

- i. Interfere with law enforcement investigations or judicial proceedings;
- ii. Deprive a person of the right to a fair trial or impartial adjudication;
- iii. Identify a confidential source or disclose confidential information relating to a criminal investigation;
- iv. Reveal criminal investigative techniques or procedures, except routine techniques and procedures; or
- v. Endanger the life or safety of any person.

9. Report of Violations of the Workplace Violence Prevention Policy and Program

Any employee or authorized employee representative who believes that the College's Workplace Violence Prevention Program is in violation of CUNY's Workplace Violence Prevention Policy, New York State Department of Labor Regulation Section 800.6 and New York State Labor Law Section 27(b), should bring their concerns to the attention of the proper authorities.

Events involving the threat of imminent danger should be immediately brought to the attention of the College's Department of Public Safety.

Events relating to concerns of other types of reportable incidents should be reported as detailed in Paragraph 7, above, and brought to the attention of the University's Senior University Executive Director of Human Resources Strategic Planning, 535 East 80th Street, New York, NY 10075.

If a matter has been brought to the proper College authority and the College has had a reasonable opportunity to correct the activity, policy or practice, the matter has not been resolved, and an employee or authorized employee representative still believes that serious violation of the program remains, the employee or authorized employee representative may request an inspection by notifying the Commissioner of Labor of the alleged violation. This notice to the Commissioner must be in writing and shall set forth with reasonable particularity the grounds for the notice and shall be signed by the employee or authorized employee representative in compliance with New York State Labor Law Section 27(b) and its implementing Regulations.

10. Retaliation

No employee is subject to criticism, reprisal, retaliation or disciplinary action by the College for good faith reporting pursuant to the Program. Individuals who make false and malicious complaints of workplace violence, as opposed to complaints that, even if erroneous, are made in good faith, may be subject to disciplinary or other appropriate action.

11. Recordkeeping

All recordkeeping and reporting shall be made in compliance with the applicable law and regulation (currently New York Labor Law Sections 27-a and 27-b and 12 NYCRR Part 800.6) and the Policy and Program.

12. Program Effectiveness and Evaluation/Post-Incident Response

At least annually or after serious incidents, the WVAT, together with the participation of the Authorized Employee Representatives, evaluates the effectiveness of the Workplace Violence Prevention Program, including post-incident responses and evaluation processes. The review focuses on incident trends and the effectiveness of the control measures taken by the College. The review also assesses whether the reporting and recordkeeping systems are effective in collecting relevant information.



Receipt of CUNY Workplace Violence Policy & Procedures

This is to certify that I have read and received the CUNY Workplace Violence Policy & Procedures. A copy of this receipt will be place in my Human Resources File.

<u>Please Print</u>		
Name	Title	
Department		
<u>Please Sign Below</u>		
Signature	 Date	



Appendix I

The City University of New York Policy on Acceptable Use of Computer Resources

Introduction

CUNY's computer resources are dedicated to the support of the university's mission of education, research and public service. In furtherance of this mission, CUNY respects, upholds and endeavors to safeguard the principles of academic freedom, freedom of expression and freedom of inquiry.

CUNY recognizes that there is a concern among the university community that because information created, used, transmitted or stored in electronic form is by its nature susceptible to disclosure, invasion, loss, and similar risks, electronic communications and transactions will be particularly vulnerable to infringements of academic freedom. CUNY's commitment to the principles of academic freedom and freedom of expression includes electronic information. Therefore, whenever possible, CUNY will resolve doubts about the need to access CUNY computer resources in favor of a user's privacy interest.

However, the use of CUNY computer resources, including for electronic transactions and communications, like the use of other university-provided resources and activities, is subject to the requirements of legal and ethical behavior. This policy is intended to support the free exchange of ideas among members of the CUNY community and between the CUNY community and other communities, while recognizing the responsibilities and limitations associated with such exchange.

Applicability

This policy applies to all users of CUNY computer resources, whether affiliated with CUNY or not, and whether accessing those resources on a CUNY campus or remotely.

This policy supersedes the CUNY policy titled "CUNY Computer User Responsibilities" and any college policies that are inconsistent with this policy.

Definitions

"CUNY Computer resources" refers to all computer and information technology hardware, software, data, access and other resources owned, operated, or contracted by CUNY. This includes, but is not limited to, personal computers, handheld devices, workstations, mainframes, minicomputers, servers, network facilities, databases, memory, and associated peripherals and software, and the applications they support, such as email and access to the internet.

"E-mail" includes point-to-point messages, postings to newsgroups and listservs, and other electronic messages involving computers and computer networks.

Rules for Use of CUNY Computer Resources

- 1. Authorization. Users may not access a CUNY computer resource without authorization or use it for purposes beyond the scope of authorization. This includes attempting to circumvent CUNY computer resource system protection facilities by hacking, cracking or similar activities, accessing or using another person's computer account, and allowing another person to access or use the user's account. This provision shall not prevent a user from authorizing a colleague or clerical assistant to access information under the user's account on the user's behalf while away from a CUNY campus or because of a disability. CUNY computer resources may not be used to gain unauthorized access to another computer system within or outside of CUNY. Users are responsible for all actions performed from their computer account that they permitted or failed to prevent by taking ordinary security precautions.
- **Purpose.** Use of CUNY computer resources is limited to activities relating to the performance by CUNY employees of their duties and responsibilities. For example, use of CUNY computer resources for private commercial or not-for-profit business purposes, for private advertising of products or services, or for any activity meant solely to foster personal gain, is prohibited. Similarly, use of CUNY computer resources for partisan political activity is also prohibited.

Except with respect to CUNY employees other than faculty, where a supervisor has prohibited it in writing, incidental personal use of computer resources is permitted so long as such use does not interfere with CUNY operations, does not compromise the functioning of CUNY computer resources, does not interfere with the user's employment or other obligations to CUNY, and is otherwise in compliance with this policy.

3. Compliance with Law. CUNY computer resources may not be used for any purpose or in any manner that violates CUNY rules, regulations or policies, or federal, state or local law. Users who engage in electronic communications with persons in other states or countries or on other systems or networks may also be subject to the laws of those other states and countries, and the rules and policies of those other systems and networks. Users are responsible for ascertaining, understanding, and complying with the laws, rules, policies, contracts, and licenses applicable to their particular use.

Examples of applicable federal and state laws include the laws of libel, obscenity and child pornography, as well as the following:

Family Educational Rights and Privacy Act
Electronic Communications Privacy Act
Computer Fraud and Abuse Act
New York State Freedom of Information Law
New York State Law with respect to the confidentiality of library records

Examples of applicable CUNY rules and policies include the following:

Sexual Harassment Policy
Policy on Maintenance of Public Order
Web Site Privacy Policy
Gramm-Leach-Bliley Information Security Program
University Policy on Academic Integrity
Information Security policies

4. Licenses and Intellectual Property. Users of CUNY computer resources may use only legally obtained, licensed data or software and must comply with applicable licenses or other contracts, as well as copyright, trademark and other intellectual property laws.

Much of what appears on the internet and/or is distributed via electronic communication is protected by copyright law, regardless of whether the copyright is expressly noted. Users of CUNY computer resources should generally assume that material is copyrighted unless they know otherwise, and not copy, download or distribute copyrighted material without permission unless the use does not exceed fair use as defined by the federal Copyright Act of 1976. Protected material may include, among other things, text, photographs, audio, video, graphic illustrations, and computer software.

- **5. False Identity and Harassment.** Users of CUNY computer resources may not employ a false identity, mask the identity of an account or computer, or use computer resources to engage in abuse of others, such as sending harassing, obscene, threatening, abusive, deceptive, or anonymous messages within or outside CUNY.
- **6. Confidentiality.** Users of CUNY computer resources may not invade the privacy of others by, among other things, viewing, copying, modifying or destroying data or programs belonging to or containing personal or confidential information about others, without explicit permission to do so. CUNY employees must take precautions to protect the confidentiality of personal or

confidential information encountered in the performance of their duties or otherwise.

- 7. Integrity of Computer Resources. Users may not install, use or develop programs intended to infiltrate or damage a computer resource, or which could reasonably be expected to cause, directly or indirectly, excessive strain on any computing facility. This includes, but is not limited to, programs known as computer viruses, Trojan horses, and worms. Users should consult with the IT director at their college before installing any programs that they are not sure are safe.
- 8. Disruptive Activities. CUNY computer resources must not be used in a manner that could reasonably be expected to cause or does cause, directly or indirectly, unwarranted or unsolicited interference with the activity of other users. This provision explicitly prohibits chain letters, virus hoaxes or other intentional e-mail transmissions that disrupt normal e-mail service. Also prohibited are spamming, junk mail or other unsolicited mail that is not related to CUNY business and is sent without a reasonable expectation that the recipient would welcome receiving it, as well as the inclusion on e-mail lists of individuals who have not requested membership on the lists, other than the inclusion of members of the CUNY community on lists related to CUNY business. CUNY has the right to require users of CUNY computer resources to limit or refrain from other specific uses if, in the opinion of the IT director at the user's college, such use interferes with efficient operations of the system, subject to appeal to the President or, in the case of central office staff, to the Chancellor.
- 9. CUNY Names and Trademarks. CUNY names, trademarks and logos belong to the university and are protected by law. Users of CUNY computer resources may not state or imply that they speak on behalf of CUNY or use a CUNY name, trademark or logo without authorization to do so. Affiliation with CUNY does not, by itself, imply authorization to speak on behalf of CUNY.
- 10. Security. CUNY employs various measures to protect the security of its computer resources and of users' accounts. However, CUNY cannot guarantee such security. Users are responsible for engaging in safe computing practices such as guarding and not sharing their passwords, changing passwords regularly, logging out of systems at the end of use, and protecting private information, as well as for following CUNY's Information Security policies and procedures. Users must report incidents of Information Security policy non-compliance or other security incidents to CUNY's Chief Information Officer and Chief Information Security Officer, and the IT director at the affected user's college.
- 11. **Filtering.** CUNY reserves the right to install spam, virus and spyware filters and similar devices if necessary in the judgment of CUNY's Office of Information

Technology or a college IT director to protect the security and integrity of CUNY computer resources. Notwithstanding the foregoing, CUNY will not install filters that restrict access to e-mail, instant messaging, chat rooms or websites based solely on content.

Confidential Research Information. Principal investigators and others who use CUNY computer resources to store or transmit research information that is required by law or regulation to be held confidential or for which a promise of confidentiality has been given, are responsible for taking steps to protect confidential research information from unauthorized access or modification. In general, this means storing the information on a computer that provides strong access controls (passwords) and encrypting files, documents, and messages for protection against inadvertent or unauthorized disclosure while in storage or in transit over data networks. Robust encryption is strongly recommended for information stored electronically on all computers, especially portable devices such as notebook computers, Personal Digital Assistants (PDAs), and portable data storage (e.g., memory sticks) that are vulnerable to theft or loss, as well as for information transmitted over public networks. Software and protocols used should be reviewed and approved by CUNY's Office of Information Technology.

13. CUNY Access to Computer Resources.

CUNY does not routinely monitor, inspect, or disclose individual usage of its computer resources without the user's consent. In most instances, if the university needs information located in a CUNY computer resource, it will simply request it from the author or custodian. However, CUNY IT professionals and staff do regularly monitor general usage patterns as part of normal system operations and maintenance and might, in connection with these duties, observe the contents of web sites, e-mail or other electronic communications. Except as provided in this policy or by law, these individuals are not permitted to seek out contents or transactional information, or disclose or otherwise use what they have observed. Nevertheless, because of the inherent vulnerability of computer technology to unauthorized intrusions, users have no guarantee of privacy during any use of CUNY computer resources or in any data in them, whether or not a password or other entry identification or encryption is used. Users may expect that the privacy of their electronic communications and of any materials contained in computer storage in any CUNY electronic device dedicated to their use will not be intruded upon by CUNY except as outlined in this policy.

CUNY may specifically monitor or inspect the activity and accounts of individual users of CUNY computer resources, including individual login sessions, e-mail and other communications, without notice, in the following circumstances:

a. when the user has voluntarily made them accessible to the public, as by posting to Usenet or a web page;

- b. when it is reasonably necessary to do so to protect the integrity, security, or functionality of CUNY or other computer resources, as determined by the college chief information officer or his or her designee, after consultation with CUNY's chief information officer or his or her designee;
- c. when it is reasonably necessary to diagnose and resolve technical problems involving system hardware, software, or communications, as determined by the college chief information officer or his or her designee, after consultation with CUNY's chief information officer or his or her designee;
- d. when it is reasonably necessary to protect CUNY from liability, or when failure to act might result in significant bodily harm, significant property loss or damage, or loss of significant evidence, as determined by the college president or a vice president designated by the president, after consultation with the Office of General Counsel and the Chair of the University Faculty Senate (if a CUNY faculty member's account or activity is involved) or Vice Chair if the Chair is unavailable;
- e. when there is a reasonable basis to believe that CUNY policy or federal, state or local law has been or is being violated, as determined by the college president or a vice president designated by the president, after consultation with the Office of General Counsel and the Chair of the University Faculty Senate (if a CUNY faculty member's account or activity is involved) or Vice Chair if the Chair is unavailable;
- f. when an account appears to be engaged in unusual or unusually excessive activity, as indicated by the monitoring of general activity and usage patterns, as determined by the college president or a vice president designated by the president and the college chief information officer or his or her designee, after consultation with CUNY's chief information officer or his or her designee, the Office of General Counsel, and the Chair of the University Faculty Senate (if a CUNY faculty member's account or activity is involved) or Vice Chair if the Chair is unavailable; or
- g. as otherwise required by law.

In those situations in which the Chair of the University Faculty Senate is to be consulted prior to monitoring or inspecting an account or activity, the following procedures shall apply: (i) the college president shall report the completion of the monitoring or inspection to the Chair and the CUNY employee affected, who shall also be told the reason for the monitoring or inspection, except where specifically forbidden by law; and (ii) if the monitoring or inspection of an account

or activity requires physical entry into a faculty member's office, the faculty member shall be advised prior thereto and shall be permitted to be present to observe, except where specifically forbidden by law.

A CUNY employee may apply to the General Counsel for an exemption from some or all of the circumstances under which CUNY may inspect and monitor computer resource activity and accounts, pursuant to subparagraphs (a)-(f) above, with respect to a CUNY computer resource used solely for the collection, examination, analysis, transmission or storage of confidential research data. In considering such application, the General Counsel shall have the right to require the employee to affirm in writing that the computer resource will be used solely for the confidential research. Any application for exemption should be made prior to using the computer resource for the confidential research.

CUNY, in its discretion, may disclose the results of any general or individual monitoring or inspection to appropriate CUNY personnel or agents, or law enforcement or other agencies. The results may be used in college disciplinary proceedings, discovery proceedings in legal actions, or otherwise as is necessary to protect the interests of the University.

In addition, users should be aware that CUNY may be required to disclose to the public under the New York State Freedom of Information Law communications made by means of CUNY computer resources in conjunction with University business.

Any disclosures of activity of accounts of individual users to persons or entities outside of CUNY, whether discretionary or required by law, shall be approved by the General Counsel and shall be conducted in accordance with any applicable law. Except where specifically forbidden by law, CUNY employees subject to such disclosures shall be informed promptly after the disclosure of the actions taken and the reasons for them.

The Office of General Counsel shall issue an annual statement of the instances of account monitoring or inspection that fall within categories (d) through (g) above. The statement shall indicate the number of such instances and the cause and result of each. No personally identifiable data shall be included in this statement.

See CUNY's Web Site Privacy Policy for additional information regarding data collected by CUNY from visitors to the CUNY website at www.cuny.edu.

14. Enforcement. Violation of this policy may result in suspension or termination of an individual's right of access to CUNY computer resources, disciplinary action by appropriate CUNY authorities, referral to law enforcement authorities for

criminal prosecution, or other legal action, including action to recover civil damages and penalties.

Violations will normally be handled through the university disciplinary procedures applicable to the relevant user. For example, alleged violations by students will normally be investigated, and any penalties or other discipline will normally be imposed, by the Office of Student Affairs.

CUNY has the right to temporarily suspend computer use privileges and to remove from CUNY computer resources material it believes violates this policy, pending the outcome of an investigation of misuse or finding of violation. This power may be exercised only by the President of each college or the Chancellor.

- 15. Additional Rules. Additional rules, policies, guidelines and/or restrictions may be in effect for specific computers, systems, or networks, or at specific computer facilities at the discretion of the directors of those facilities. Any such rules which potentially limit the privacy or confidentiality of electronic communications or information contained in or delivered by or over CUNY computer resources will be subject to the substantive and procedural safeguards provided by this policy.
- 16. **Disclaimer.** CUNY shall not be responsible for any damages, costs or other liabilities of any nature whatsoever with regard to the use of CUNY computer resources. This includes, but is not limited to, damages caused by unauthorized access to CUNY computer resources, data loss, or other damages resulting from delays, non-deliveries, or service interruptions, whether or not resulting from circumstances under the CUNY's control.

Users receive and use information obtained through CUNY computer resources at their own risk. CUNY makes no warranties (expressed or implied) with respect to the use of CUNY computer resources. CUNY accepts no responsibility for the content of web pages or graphics that are linked from CUNY web pages, for any advice or information received by a user through use of CUNY computer resources, or for any costs or charges incurred by a user as a result of seeking or accepting such advice or information.

CUNY reserves the right to change this policy and other related policies at any time. CUNY reserves any rights and remedies that it may have under any applicable law, rule or regulation. Nothing contained in this policy will in any way act as a waiver of such rights and remedies.



MEMORANDUM

To: IT Steering Committee

From: Brian Cohen

Date: March 26, 2009

Subject: Revised Information Technology Security Procedures

The following is a revised version of the Information Technology Security Procedures last revised and issued on October 16, 2007. The revisions represent the University's obligations under new state and federal legislation, the results of our experience with these procedures over the past seventeen months, and your comments.

INFORMATION TECHNOLOGY SECURITY PROCEDURES

I. General

1. Introduction – Each University entity (i.e., a College or a Central Office department) and all users with access to University information available in University files and systems, whether in computerized or printed form, are continually responsible for maintaining the integrity, accuracy, and privacy of this information. Loss of data integrity, theft of data, and unauthorized or inadvertent disclosure could lead to a significant exposure of the University and its constituents as well as those directly responsible for the loss, theft, or disclosure. Non-compliance with state or federal laws could lead to direct financial loss to the University. Users are directed by these Information Technology Security Procedures ("IT Security Procedures"), which cover all University networks and systems.

Any proposed exception to these IT Security Procedures must be communicated in writing and approved by the University Chief Information Officer or his designee prior to any action introducing a non-compliance situation.

2. Non-Public University Information – For the purpose of these IT Security Procedures, the term "Non-Public University Information" means personally identifiable information (such as an individual's Social Security Number; driver's license number or non-driver identification card number; account number, credit or debit card number, in combination with any required security code, access code, or password that would permit access to an individual's financial account; personal electronic mail address; Internet identification name or password; and parent's surname prior to marriage); information in



student education records that is protected under the Family Educational Rights and Privacy Act of 1974 (FERPA) and the related regulations set forth in 34 CFR Part 99; other information relating to the administrative, business, and academic activities and operations of the University (including employee evaluations, employee home addresses and telephone numbers, and other employee records that should be treated confidentially); and any other information available in University files and systems that by its nature should be treated confidentially.

II. Access Issues

3. Access to University Information

- (a) <u>General</u>. Access to University information available in University files and systems, whether in electronic or hard copy form, must be limited to individuals with a strict need to know, consistent with the individual's job responsibilities.
- (b) Employees Permitted Access to Non-Public University Information. Except as provided elsewhere in this section 3, access to Non-Public University Information must be restricted to full-time and regular part-time employees of the University and its related entities, the University's adjunct faculty, and employees of the University's contractors who have been permitted such access under a written agreement with the University. All employees permitted access to Non-Public University Information must be specifically reviewed by the Vice President of Administration or the equivalent at the College or in the Central Office department involved in accordance with section 4 below.
- (c) <u>Employees Requiring Waiver</u>. Employees of the University or its related entities who are not full-time and regular part-time employees (e.g., individuals hired as part of a temporary staff augmentation or in connection with an individual project), University adjunct faculty, or employees of the University's contractors who have been permitted access to Non-Public University Information under a written agreement with the University may not be permitted any such access, except pursuant to the waiver procedure set forth in section 3(e) below.
- (d) <u>CUNY Students</u>. CUNY Students may not be permitted any access to Non-Public University Information, except pursuant to the waiver procedure set forth in section 3(e) below. For the purpose of these IT Security Procedures, "CUNY Students" means all students enrolled in any academic program, or taking any course or courses, at the University, except the following:
 - (i) students who are also University adjunct faculty,
 - (ii) employees of the University or its related entities or contractors who are taking a Continuing Education course at the University,



- (iii) employees of the University or its related entities or contractors who are taking a credit-bearing course at a College other than where they are employed, and
- (iv) employees of the University or its related entities who are taking a creditbearing course at the College where they are employed, provided they are taking the course pursuant to a tuition waiver program under a collective bargaining agreement, or are excluded from collective bargaining and are taking the course under a University tuition waiver policy.
- (e) <u>Waiver Procedure</u>. An individual who is not permitted access to Non-Public University Information under sections 3(c) and (d) above may be permitted such access on a strict need to know basis, consistent with the individual's job responsibilities, but only if a waiver is granted by the University Chief Information Officer or his designee following a written request by the Vice President of Administration or equivalent at the College or in the Central Office department involved. Any waiver granted will be limited to a specific period of time, which may not exceed one year. In order to extend the waiver after expiration, this waiver procedure must be repeated. The written waiver request must state:
 - the specific status of the individual as an employee of the University or one of its related entities or contractors and/or as a CUNY Student,
 - the type and form of access that is being requested,
 - the length of time for which access is being requested,
 - the reasons for permitting such access, and
 - how and by whom the individual will be supervised.

The Vice President of Administration or equivalent at the College or in the Central Office department will be responsible for maintaining all documentation of any waiver request and disposition.

- (f) <u>Acknowledgment of University Policy</u>. All employees described in section 3(b) above and all employees and CUNY Students granted a waiver under section 3(e) above must acknowledge, by signature, receiving a copy of the University's Policy on Acceptable Use of Computer Resources (available at http://security.cuny.edu) and these IT Security Procedures.
- **4. Review of Access to University Files and Systems** Each University entity must review, at least once during each of the fall and spring semesters, individuals having any type of access to University files and systems and must remove user IDs and access capabilities that are no longer current. This review includes, but is not limited to, access to University networks, applications, sensitive transactions, databases, and specialized data access utilities.



An attestation letter of such review must be completed by the Vice President of Administration or the equivalent at the College or in the Central Office department and submitted to the University Information Security Officer no later than the date specified in the instructions for completing the attestation letter. Documentation showing the review steps taken in arriving at the attestation must be retained in the office of the Vice President of Administration or the equivalent at the College or in the Central Office department and be made available for further review by the University Information Security Officer and internal/external audit entities as appropriate.

5. Severance of Access upon Termination or Transfer of Employment – Access to University files and systems must be removed no later than an individual's last date of employment. User IDs must not be re-used or re-assigned to another individual at any time in the future.

For job transfers, access to University files and systems must be removed no later than the individual's last date in the old position and established no sooner than his or her first date in the new position.

In special circumstances where underlying information attributed to a user ID must be retained and made accessible from another user ID, approval must be obtained from both the Vice President of Administration or the equivalent at the College or in the Central Office department and the University Information Security Officer. Such arrangements, if approved, will be for a fixed duration of time, determined on a case-by-case basis.

- **6. Authentication** Users of University files and systems must use an individually assigned user ID to gain access to any University network or application.
- 7. User IDs Users of University files and systems other than technical employees within Information Technology departments at a College or in the Central Office must have no more than one individually assigned user ID per system. The user ID must be in a format consistent with University naming standards, clearly identifiable to a user, and not shared.

Generic-named user IDs used in background/batch processes or peer-to-peer processes and multiple user IDs required to maintain, support, and operate systems by technical employees within Information Technology departments at a College or in the Central Office may be allowed under limited circumstances, provided that use of such identities is auditable, individual user accountability is assigned to each of these identities, oversight is administered by line management of the user assigned to the account, and use of these accounts is specifically approved by the Chief Information Officer or the equivalent at the College or in the Central Office department.



Each University entity must maintain an accurate record of the person to whom each user ID has been assigned, including name, title, level of access, office, department, and phone number

8. Passwords – Passwords and private encryption keys must be treated as Non-Public University Information and, as such, are not to be shared with anyone. A password must be entered by the user each time he or she authenticates to a University system. Use of auto-complete features to expedite or script user logins (e.g., "Windows Remember My Passwords?") is prohibited.

All passwords must be changed at least every 90 days. Accounts which have special access privileges must be changed at least every 60 days. Passwords should not be based on personal information (e.g., family names, pets, hobbies, and friends) and should be difficult to guess. Passwords should be at least eight positions in length. Each University entity may adopt more stringent password controls.

9. Remote Access – Access to administrative and academic support systems from non-University locations is allowed only through secure remote connections (e.g., VPN) that provide for unique user authentication and encrypted communications. The Chief Information Officer or the equivalent at the College or in the Central Office department must approve in writing all requests for remote access capability.

III. Disclosure Issues

10. Disclosure of Non-Public University Information

- (a) <u>General Rule</u>. Unless otherwise required by law, users of University files and systems must not disclose any Non-Public University Information (as defined in section 2 above) to the general public or any unauthorized users.
- (b) <u>Definition of Social Security Numbers</u>. For the purpose of these IT Security Procedures, the term "Social Security Number" means the nine digit account number issued by the U.S. Social Security Administration and any number derived therefrom. It does not include any number that has been encrypted.
- (c) <u>Special Rules for Social Security Numbers</u>. Unless required by law, users of University files and systems must not:
 - (i) Intentionally communicate to the general public or otherwise make available to the general public in any manner an individual's Social Security Number.
 - (ii) Publicly post or display an individual's Social Security Number or place a Social Security Number in files with unrestricted access.



- (iii) Print an individual's Social Security Number on any card or tag required for the individual to access products, services, or benefits provided by the University.
- (iv) Print an individual's Social Security Number on any identification badge or card, including any time card.
- (v) Require an individual to transmit his or her Social Security Number over the Internet, unless the connection is secure or the Social Security Number is encrypted.
- (vi) Require an individual to use his or her Social Security Number to access an Internet website, unless a password or unique personal identification number or other authentication device is also required to access the Internet website.
- (vii) Include an individual's Social Security Number, except the last four digits thereof, on any materials that are mailed to the individual, or in any electronic mail that is copied to third parties, unless state or federal law requires the Social Security Number to be on the document to be mailed. Notwithstanding this paragraph (vii), Social Security Numbers may be included in applications and forms sent by mail, including documents sent as part of an application or enrollment process, or to establish, amend, or terminate an account, contract, or policy, or to confirm the accuracy of the Social Security Number. A Social Security Number that is permitted to be mailed under this paragraph (vii) may not be printed, in whole or in part, on a postcard or other mailer not requiring an envelope, or visible on the envelope or without the envelope having been opened.
- (viii) Encode or embed a Social Security Number in or on a card or document, including, but not limited to, using a bar code, chip, magnetic strip, or other technology, in place of removing the Social Security Number as required by this section 10.
- (ix) Transmit an individual's Social Security Number onto portable devices without encryption as specified in section 13 below.

These special rules do not prevent the collection, use, or release of a Social Security Number as required by state or federal law, or the use of a Social Security Number for internal verification, fraud investigation, or administrative purposes.

11. Web Accessible Data – Because Non-Public University Information must not be made accessible to the general public, all University web pages must be programmed with a parameter to prevent the caching of Non-Public University Information by Internet



search engines. Directory/folder listings of files through a web page must be disabled. Secure and encrypted data transfer protocols must be used when uploading data to a web site.

12. Security Incident Response and Reporting

- (a) Acknowledgment and Reporting of Security Incidents. Each Chief Information Officer or the equivalent at a College or in a Central Office department must, within 24 hours of receipt by his or her College or department, acknowledge or respond in writing to any initial security incident report issued by the University Chief Information Officer or the University Information Security Officer. The Chief Information Officer or the equivalent at the College or in the Central Office department must make a full written report of such incident to the University Chief Information Officer and the University Information Security Officer, including root cause identification, explanation of the remediation plan, and extent of data loss, within 72 hours of the College's or department's receipt of the initial security incident report.
- (b) <u>CUNY Breach Reporting Procedure</u>. The CUNY Breach Reporting Procedure (available at http://security.cuny.edu) must be followed whenever a security incident occurs involving the unauthorized disclosure of any of the following Non-Public University Information without encryption:
 - (i) Social Security Number;
 - (ii) driver's license number or non-driver identification card number; or
 - (iii) account number, credit or debit card number, in combination with any required security code, access code, or password that would permit access to an individual's financial account.
- (c) <u>Limiting Disclosure</u>. When any Non-Public University Information has been disclosed without valid authorization and encryption, all reasonable efforts must be taken to eliminate further disclosure, including immediate disconnection of any computer device involved from the University network.
- 13. Portable Devices/Encryption The Non-Public University Information listed in section 12(b) above must not be stored, transported, or taken home on portable devices (e.g., laptops, flash drives) of any type without specific approval of both the Vice President of Administration or the equivalent at the College or in the Central Office department and the University Information Security Officer. Where approval is granted, additional password protection and encryption of data are required. In addition, the Non-Public University Information listed in section 12(b) above stored on non-portable devices or



transmitted between devices (e.g., servers, workstations) must be encrypted. The University has made encryption tools available to staff and faculty to comply with the requirements of this procedure.

14. Safeguarding and Disposal of Devices and Records Containing Non-Public University Information – Whenever records containing Non-Public University Information are subject to destruction under the CUNY Records Retention and Disposition Schedule (available at http://policy.cuny.edu/text/toc/rrs), the storage devices such as hard disk drives and other media (e.g. tape, diskette, CDs, DVDs, cell phones, digital copiers, or other devices) and hard copy documents that contain such information must be securely overwritten or physically destroyed in a manner that prevents unauthorized disclosure. While in use, such devices and documents must not be left open or unattended on desks or elsewhere for extended periods of time.

IV. Maintenance of Data and Systems

15. Change of Data in Records

- (a) <u>Authorization of Changes</u>. When updates are not part of normal business processing, individuals within Information Technology departments at a College or in a Central Office department who have access to University information to support ongoing operations of administrative files and systems must not alter any such information unless given specific approval by the Vice President of Administration or the equivalent at the College or in the Central Office department. A record of any data change, including evidence of approval, must be retained in the office of the Vice President of Administration or the equivalent at the College or in the Central Office department.
- (b) No Changes by Remote Access. Any direct changes to official data of record stored in University files and systems must be done from a College or Central Office location. No form of remote access that allows direct changes to student or employee data is allowed. Students and employees may, however, have remote self-service access in order to update their own personal data.
- **16. Centralized Data Management** Data that are acquired or managed by Central Office departments (e.g., CPE, skill scores) must be loaded into University files and systems and may not be modified by Colleges at the local level. Colleges will be able to view such data and through an exception process be able to request changes. Each College is responsible for reviewing a data edit report for accuracy and completeness whenever data are uploaded to its respective student or human resources systems.
- 17. Grade Changes Any University system that allows for grade changes must have multiple security levels enabled, including the maintenance of a separate password that is administered and changed regularly for the purpose of authenticating individual users to



the grade change function. Grade change functions must be able to create an audit trail from which edit reports will be regularly prepared for review by a management designee other than the person who has responsibility for the area making grade changes. The number of individuals allowed to make grade changes must be strictly limited to employees of the University and its related entities, subject to the additional criteria set forth in section 3 above. Current University student information systems support this requirement.

- 18. Changes in Information Files and Systems Existing and new information files and systems must comply with these IT Security Procedures. Modifications to existing information files and systems will be required to maintain compliance. Ghost files and systems and development/test files and systems holding copies of data from master files and systems must also comply with these procedures. Ghost files and systems should be eliminated to minimize the number of copies and access points to Non-Public University Information. Where files and systems cannot be modified to comply with these procedures, the University entity must notify the University Chief Information Officer and the University Information Security Officer in writing, providing a written business case justifying the decision.
- 19. Vulnerability Assessments Each University entity must establish a routine program to test, monitor, and remediate technical and data vulnerabilities on its network. The program should include a combination of continuous monitoring and on-demand testing tools. Monitoring and testing should report on operating system configuration, software patch level vulnerabilities, and unprotected data. The Central Office may initiate vulnerability testing at its discretion. Regular reporting of test results must be made available to the University Information Security Officer.
- **20. Device Management** All devices that are allowed to connect to University networks and systems that support administrative, business, and academic activities and operations must be maintained at current anti-virus/malicious code protection at all times. In addition, security updates to operating systems must be applied on a timely basis after appropriate testing. Although the University does not manage student computers, procedures should be implemented to minimize the risk to University files and systems.
- **21. Management Responsibility** College and Central Office management are responsible for maintaining and overseeing compliance with these IT Security Procedures within their line responsibilities.
- **22. Information Technology Security Procedure Governance** The University will organize working groups and work through existing councils to identify and establish procedures and other areas of change that may be instituted to further protect the integrity of University files and systems.



Additional and/or revised procedural statements may be adopted from time to time and introduced for University compliance. Further procedural documents may be developed to elaborate detail on these IT Security Procedures, but they will in no way detract or suggest a different level of compliance that is expected or required.

Non-compliance with these IT Security Procedures may result in termination of access to University network and applications until such time that compliance is re-established. Non-compliance may also result in disciplinary action.

These IT Security Procedures, related policies and advisories, and links to the New York State Cyber Security Policies are available at http://security.cuny.edu.

New Employee On-Boarding & Existing Employee Orientation for IT Security

Why is IT Security important at CUNY?

- We must ensure our academic and administrative systems continue to be available to run the business of the University and to serve our faculty, students, and staff.
- We must maintain accurate University data and prevent unauthorized changes (e.g., grades, financial aid information).
- We must be reputable custodians and are required by law to protect the privacy of personal data belonging to our faculty, students, and staff.

What are the IT Security risks to CUNY?

- Don't be phished. Phishing is a scam in which an email message directs you to click on a link that takes you to a web site where you are prompted for personal information such as passwords, social security number, bank account number or credit card number. Both the link and web site may closely resemble an authentic web site, but they are not legitimate.
- Don't disclose personal information to someone you don't know. Social engineering is an approach to gain access to information through misrepresentation. It is the conscious manipulation of people to obtain information without their realizing that a security breach is occurring. It may take the form of impersonation via telephone or in person, and through e-mail.
- Don't disclose personal information within CUNY unless it is absolutely necessary. The need for disclosing your social security number outside of the Human Resource (HR) department would be unusual. When in doubt, contact the HR department directly to verify the legitimacy of the request.
- Protect your user ID and password and never share them. Your user ID is your identification, and it is what links you to your actions on CUNY's computer systems. Your password authenticates your user ID. Use passwords that are difficult to guess and change them regularly.
- You are responsible for actions taken with your ID and password. Log off or lock your computer when you are away from your workstation. In most cases, hitting the "Control-Alt-Delete" keys and then selecting "Lock Computer" will keep others out. You will need your password to sign back in, but doing this several times a day will help you to remember your password.
- E-mail and portable devices are not secure. Do not ship personal information belonging to you or CUNY faculty, students, and staff to portable devices (e.g., portable hard drives, memory) or send or request to be sent such personal information in an e-mail text or as an email attachment without encryption.
- Be careful when using the Internet. Malicious code can take forms such as a virus, worm or Trojan and can be hidden behind an infected web page or a downloaded program. Keep anti-virus and anti-malware programs and the software on your workstation up-to-date at all times. Only install software authorized by your department, and never disable or change security programs and their configuration.

Where are the CUNY IT Security information resources?

- Security.cuny.edu is available 24 hours a day from any Internet accessible location without a user ID and password. All relevant policies, procedures, and advisories, the IT Security awareness program and materials, and links to external IT Security information resources are located here.
- Find the Policy on Acceptable Use of Computer Resources under Info Security Policies.

- Find the IT Security Procedures General under Info Security Policies.
- To take the IT Security Awareness tutorial, approximately 30 minutes, click on the padlock on the home page of security.cuny.edu.

Who to contact for help with IT Security at CUNY?

- Your supervisor.
- Your College web-site.
- security.cuny.edu
- The College IT Security Manager (click on Campus Security Managers Contact Information at security.cuny.edu under Contact Us).
- The College Chief Information Officer or equivalent in the Central Office department.
- The CUNY Central IT Security Office at security@mail.cuny.edu; or the Contact Us page at security.cuny.edu; or the Who to Contact for Help page at security.cuny.edu.

Where are some external resources for help with IT Security located?

- New York State Office of Cyber Security and Critical Infrastructure Coordination (CSCIC) at www.cscic.state.ny.us
- Federal Trade Commission at www.ftc.gov
- Privacy Rights Clearinghouse Nonprofit Consumer Information and Advocacy Organization at www.privacyrights.org
- Anti-Phishing Working Group Committed to wiping out Internet scams and fraud at www.antiphishing.org
- Microsoft Malware Protection Center, Threat Research and Response at www.microsoft.com/security/portal

What is required of me as an employee of CUNY?

- Acknowledge, by signature below, receipt of the Policy on Acceptable Use of Computer Resources.
- Acknowledge, by signature below, receipt of the IT Security Procedures General.
- Complete the IT Security Awareness tutorial within the first 30 days of employment.
- Maintain compliance with the Policy on Acceptable Use of Computer Resources and the IT Security Procedures at all times.

If you discover or suspect a security breach, you should report the incident to your supervisor, the College IT Security Manager (click on Contact Us at security.cuny.edu) and the CUNY Central IT Security Office (security@mail.cuny.edu) immediately.

I hereby acknowledge receipt of the Policy on Acceptable Use of Computer Resources and the IT Security Procedures – General.	
(College/business area)	(date)

One copy for personnel file. One copy to employee. V02, July 2010

THE CITY UNIVERSITY OF NEW YORK POLICY ON SEXUAL HARASSMENT

Policy Statement

It is the policy of The City University of New York to promote a cooperative work and academic environment in which there exists mutual respect for all University students, faculty, and staff. Harassment of employees or students based upon sex is inconsistent with this objective and contrary to the University's non-discrimination policy. Sexual harassment is illegal under Federal, State, and City laws, and will not be tolerated within the University.

The University, through its colleges, will disseminate this policy and take other steps to educate the University community about sexual harassment. The University will establish procedures to ensure that investigations of allegations of sexual harassment are conducted in a manner that is prompt, fair, thorough, and as confidential as possible under the circumstances, and that appropriate corrective and/or disciplinary action is taken as warranted by the circumstances when sexual harassment is determined to have occurred. Members of the University community who believe themselves to be aggrieved under this policy are strongly encouraged to report the allegations of sexual harassment as promptly as possible. Delay in making a complaint of sexual harassment may make it more difficult for the College to investigate the allegations.

A. Prohibited Conduct

It is a violation of University policy for any member of the University community to engage in sexual harassment or to retaliate against any member of the University community for raising an allegation of sexual harassment, for filing a complaint alleging sexual harassment, or for participating in any proceeding to determine if sexual harassment has occurred.

B. Definition of Sexual Harassment

For purposes of this policy, sexual harassment is defined as unwelcome sexual advances, requests for sexual favors, and other oral or written communications or physical conduct of a sexual nature when:

- 1. submission to such conduct is made either explicitly or implicitly a term or condition of an individual's employment or academic standing;
- 2. submission to or rejection of such conduct by an individual is used as a basis for employment or academic decisions affecting such individual; or
- 3. such conduct has the purpose or effect of unreasonably interfering with an individual's work or academic performance or creating an intimidating, hostile or abusive work or academic environment.

Sexual harassment can occur between individuals of different sexes or of the same sex. Although sexual harassment most often exploits a relationship between individuals of

unequal power (such as between a faculty member and student supervisor and employee, or tenured and untenured faculty members), it may also occur between individuals of equal power (such as between fellow students or coworkers), or in some circumstances even where it appears that the harasser has less power than the individual harassed (for example, a student sexually harassing a faculty member). A lack of intent to harass may be relevant to, but will not be determinative of, whether sexual harassment has occurred.

C. Examples of Sexual Harassment

Sexual harassment may take different forms. Using a person's response to a request for sexual favors as a basis for an academic or employment decision is one form of sexual harassment. Examples of this type of sexual harassment include, but are not limited to, the following:

- requesting or demanding sexual favors in exchange for employment or academic opportunities (such as hiring, promotions, grades, or recommendations);
- submitting unfair or inaccurate job or academic evaluations or grades, or denying training, promotion, or access to any other employment or academic opportunity, because sexual advances have been rejected.

Other types of unwelcome conduct of a sexual nature can also constitute sexual harassment, if sufficiently severe or pervasive that the target does find, and a reasonable person would find, that an intimidating, hostile or abusive work or academic environment has been created. Examples of this kind of sexual harassment include, but are not limited to, the following:

- sexual comments, teasing, or jokes;
- sexual slurs, demeaning epithets, derogatory statements, or other verbal abuse;
- graphic or sexually suggestive comments about an individual's attire or body;
- inquiries or discussions about sexual activities;
- pressure to accept social invitations, to meet privately, to date, or to have sexual relations;
- sexually suggestive letters or other written materials;
- sexual touching, brushing up against another in a sexual manner, graphic or sexually
- suggestive gestures, cornering, pinching, grabbing, kissing, or fondling;
- coerced sexual intercourse or sexual assault.

D. Consensual Relationships

Amorous, dating, or sexual relationships that might be appropriate in other circumstances have inherent dangers when they occur between a faculty member, supervisor, or other member of the University community and any person for whom he or she has a professional responsibility. These dangers can include: that a student or employee may feel coerced into an unwanted relationship because he or she fears that refusal to enter into the relationship will adversely affect his or her education or employment; that conflicts of interest may arise when a faculty member, supervisor, or other member of the

University community is required to evaluate the work or make personnel or academic decisions with respect to an individual with whom he or she is having a romantic relationship; that students or employees may perceive that a fellow student or coworker who is involved in a romantic relationship will receive an unfair advantage; and that if the relationship ends in a way that is not amicable, either or both of the parties may wish to take action to injure the other party.

Faculty members, supervisors, and other members of the University community who have professional responsibility for other individuals, accordingly, should be aware that any romantic or sexual involvement with a student or employee for whom they have such a responsibility may raise questions as to the mutuality of the relationship and may lead to charges of sexual harassment. For the reasons stated above, such relationships are strongly discouraged.

For purposes of this section, an individual has "professional responsibility" for another individual at the University if he or she performs functions including, but not limited to, teaching, counseling, grading, advising, evaluating, hiring, supervising, or making decisions or recommendations that confer benefits such as promotions, financial aid awards or other remuneration, or that may impact upon other academic or employment opportunities.

E. Academic Freedom

This policy shall not be interpreted so as to constitute interference with academic freedom.

F. False and Malicious Accusations

Members of the University community who make false and malicious complaints of sexual harassment, as opposed to complaints which, even if erroneous, are made in good faith, will be subject to disciplinary action.

G. Procedures

The University has developed procedures to implement this policy. The President of each constituent college of the University, the Senior Vice Chancellor at the Central Office, and the Dean of the Law School shall have ultimate responsibility for overseeing compliance with this policy at his or her respective unit of the University. In addition, each dean, director, department chairperson, executive officer, administrator, or other person with supervisory responsibility shall be required to report any complaint of sexual harassment to the individual or individuals designated in the procedures. All members of the University community are required to cooperate in any investigation of a sexual harassment complaint.

H. Enforcement

There is a range of corrective actions and penalties available to the University for violations of this policy. Students, faculty, or staff who are found, following applicable disciplinary proceedings, to have violated this Policy are subject to various penalties, including termination of employment and/or student explusion from the University.

Sexual Harassment Awareness and Intake Committee

The Sexual Harassment Awareness and Intake Committee is responsible for educating the Lehman College community about sexual harassment and its potential consequences to the University community. The members of the Sexual Harassment Awareness and Intake Committee are available to respond to inquiries, receive complaints alleging sexual harassment from any member of the college community, and to refer individuals and/or the complaint to the Sexual Harassment Coordinator. The members of the Sexual Harassment Awareness and Intake Committee are:

Annecy Baez, Counseling Center, 718-960-8761 Chelsea Campbell, Paralegal Studies Program/Continuing Education, 718-960-1159 Vanessa Gonzalez, Campus Life, 718-960-8468 Joette Reaves, Health Programs/Continuing Education, 718-960-8998 Maritza Rivera, Office of Compliance and Diversity, 718-960-8111 Michael Sullivan, Campus Life, 718-960-8535

Sexual Harassment Coordinator

Dawn Ewing Morgan, Office of Compliance and Diversity, 718-960-8111

Sexual Harassment Deputy Coordinators

Graciela Castex, Sociology and Social Work, 718-960-7864 John Cirace, Economics & Accounting, 718-960-8388 Vincent Zucchetto, Student Affairs, 718-960-8242