NESSIE New Hire Guide

UNIVERSITY OF ILLINOIS
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Guide Information

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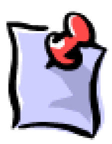
Revision Date:	May 22, 2006
Version:	1.3

Conventions Used in this Guide

Throughout this guide, you will find icons representing various types of information. These icons serve as reminders of their associated text.



Indicates a **Note** or additional information that might be helpful to you.

Indicates a **Hint** such as a tip, shortcut, or additional way to do something.

Indicates a **Warning** of an action that you should not perform or that might cause problems in Banner.

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About NESSIE New Hire

As a new hire or returning employee at the University of Illinois, you are required to complete required new hire forms online through the NESSIE New Hire system. This guide describes what NESSIE New Hire is and how to complete the new hire forms. Tips and hints for submitting the forms are also provided in this guide.

You will use NESSIE New Hire until your new hire forms have been completed. You will have 60 days from your hire date to complete many of your new hire forms; your new hire logon ID and password will expire 60 days after your hire date.

NOTE: You will have 3 working days after the first day of employment to complete the I-9 form. You can complete this form on paper and send it to your department.

If you are benefits eligible, you will have 10 days from the date you attend a benefits orientation to complete your benefits forms.

The website for NESSIE New Hire is:

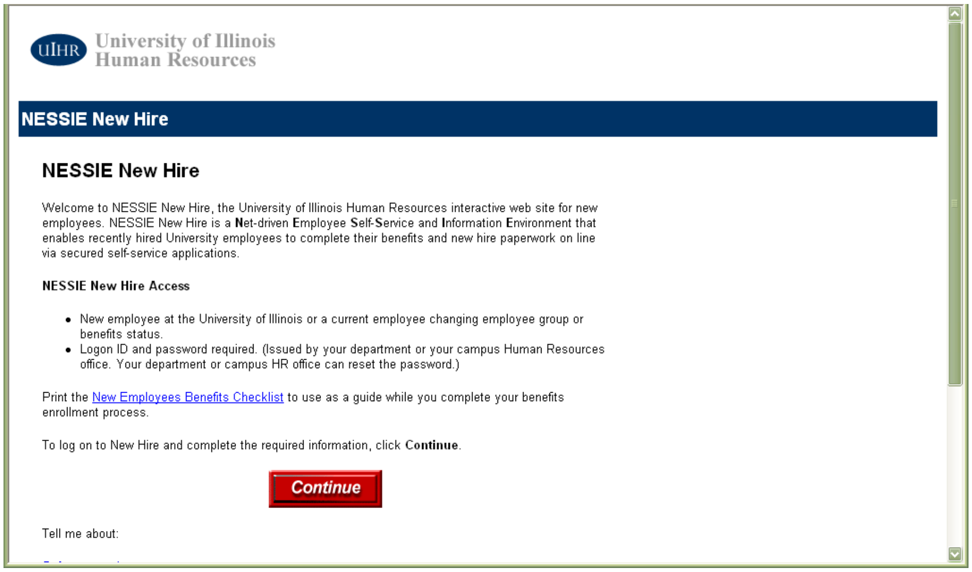
https://newhire.uihr.uillinois.edu

Once your new hire forms have been completed you can use a separate employee website called NESSIE (Net-Drive Employee Self-Service Information Environment). NESSIE will allow you to view or edit your personal information such as birth date, marital status, education information, benefits information, or earnings information.

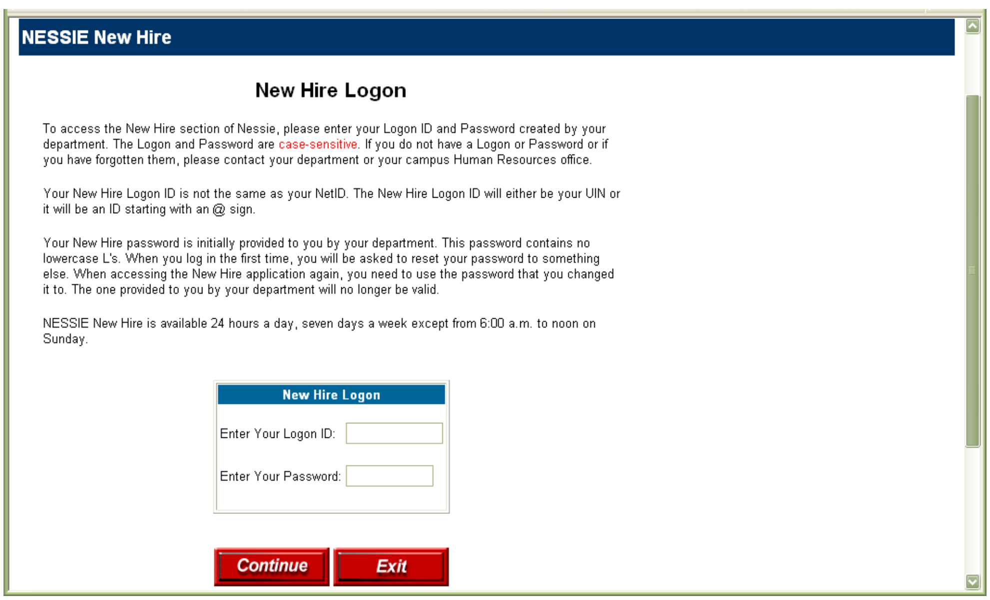
You will not be able to access a form through NESSIE New Hire once it has been submitted. If you need to make a change to a submitted form, you may go to regular NESSIE to update or add any additional information.

Logging In to NESSIE New Hire

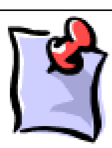
To begin the new hire process, go to NESSIE New Hire at https://newhire.uihr.uillinois.edu.



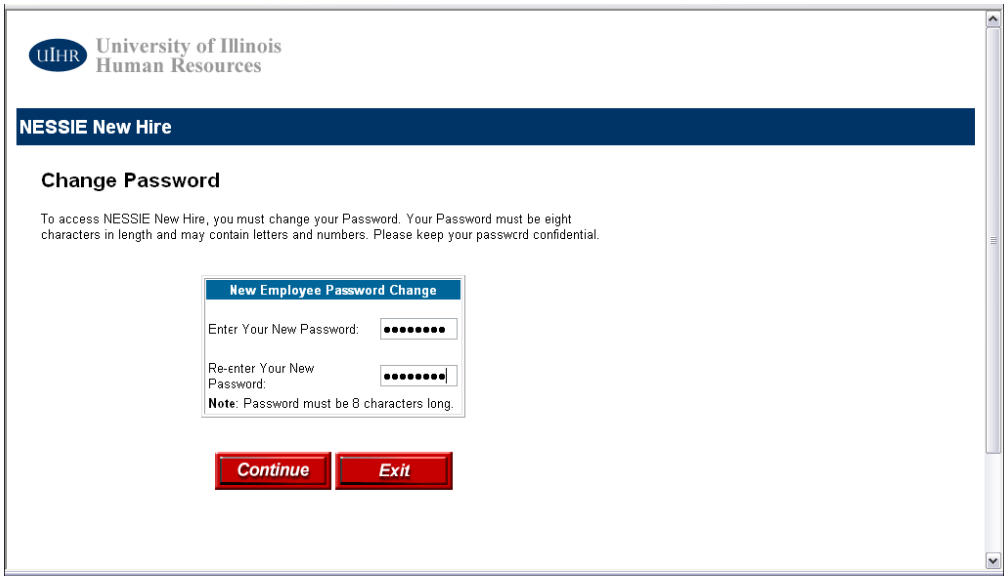
On the **NESSIE New Hire** page, click the **Continue** button.



- Enter the New Hire ID and password issued to you by your department. The New Hire Logon ID is NOT the same as the NetID. The New Hire Logon ID will either be your University ID Number (UIN) (if you already exist in Banner or i-Card) or it will be an ID starting with an @ sign.
- Click the **Continue** button.

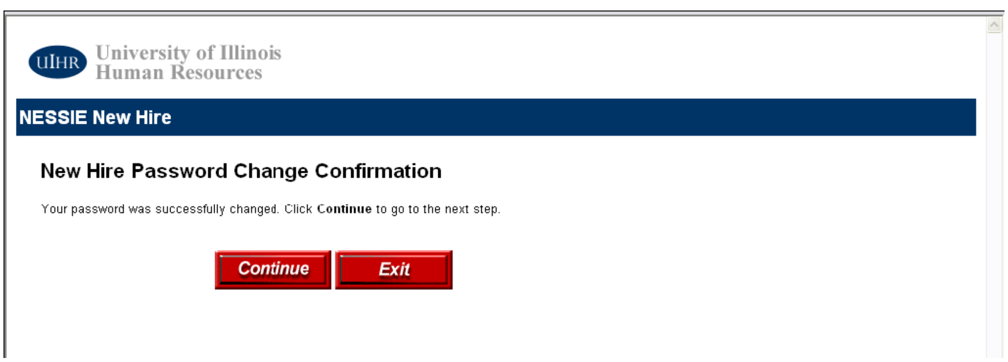


NOTE: Your ID and Password are **case sensitive.**



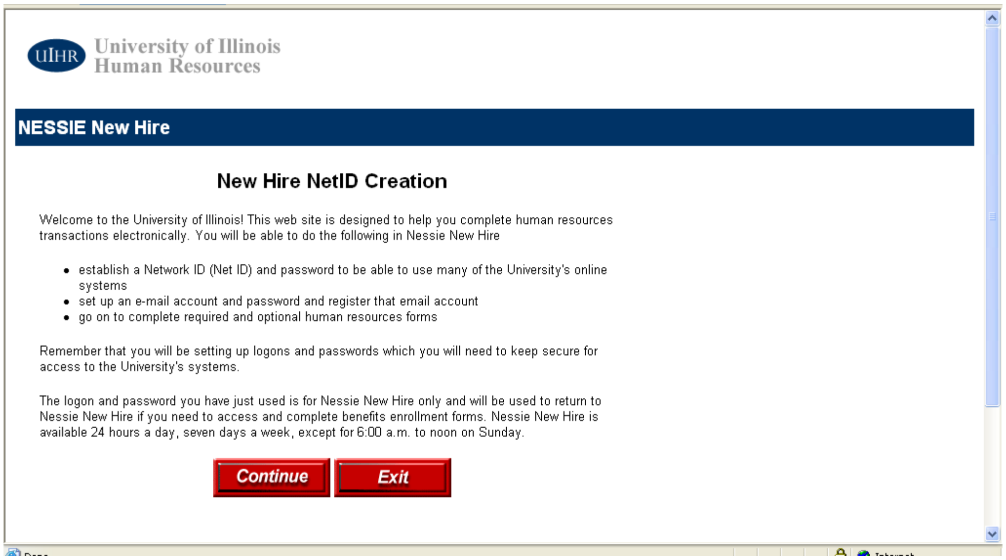
- After logging in for the first time, you will come to a **Change Password** page will be prompted to change your password to something you choose. Enter the new password of your choice on the **Change Password** page.
- **Re-enter the new password** to confirm it.
- Click the **Continue** button.

NOTE: Remember the new password you select. You will use this **new password** to log into NESSIE New Hire from now on.



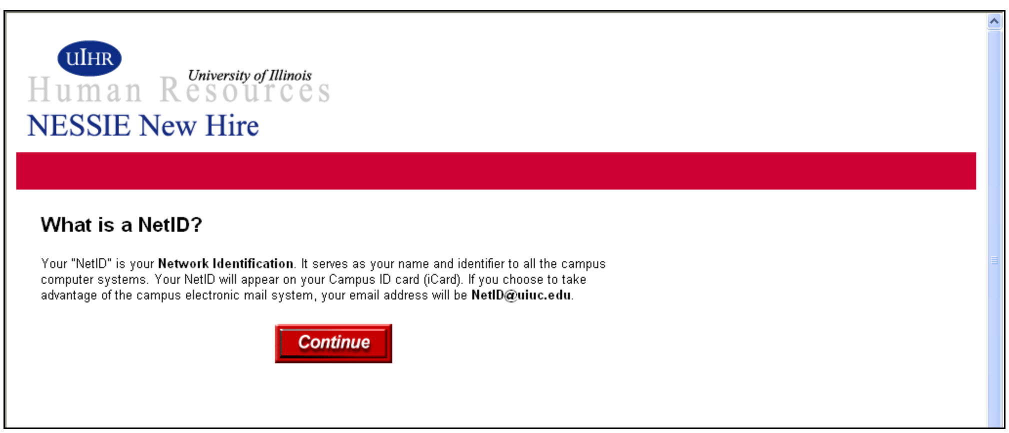
You will receive a confirmation screen after resetting your new hire password.

Creating a University Network ID (NetID) - UIUC ONLY

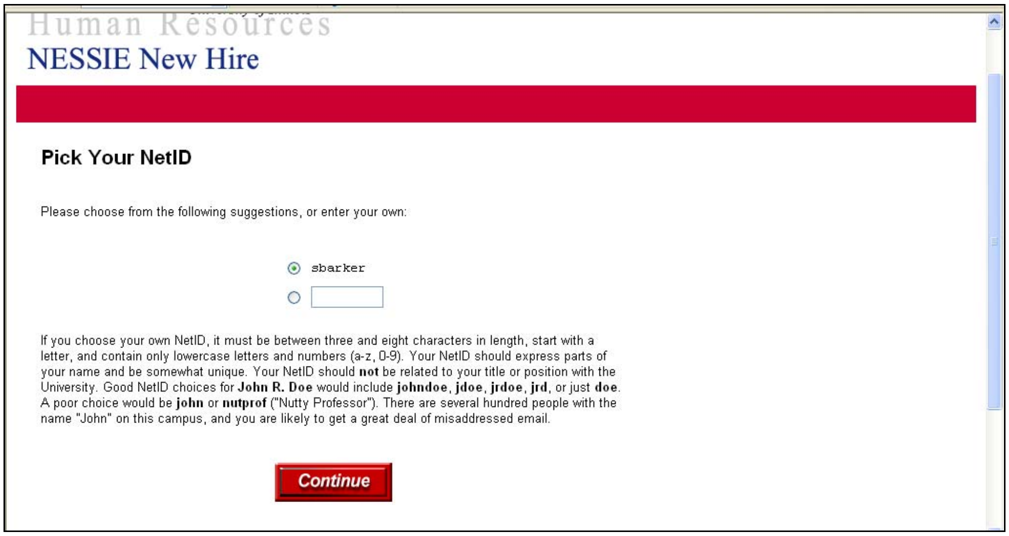


- Read the information on the **New Hire NetID Creation** page.
- Click the **Continue** button.

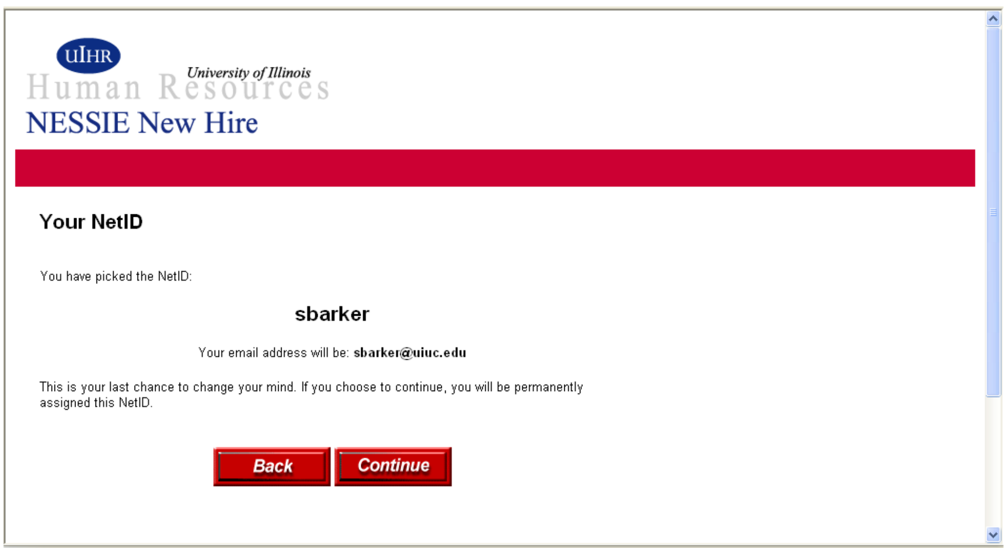
NOTE: The ID and password you entered to log into NESSIE New Hire is ONLY for NESSIE New Hire. The NetID and password you create here will allow you to access other University systems such as regular NESSIE.



- Read the information on the **What is a NetID** page.
- Click the **Continue** button.



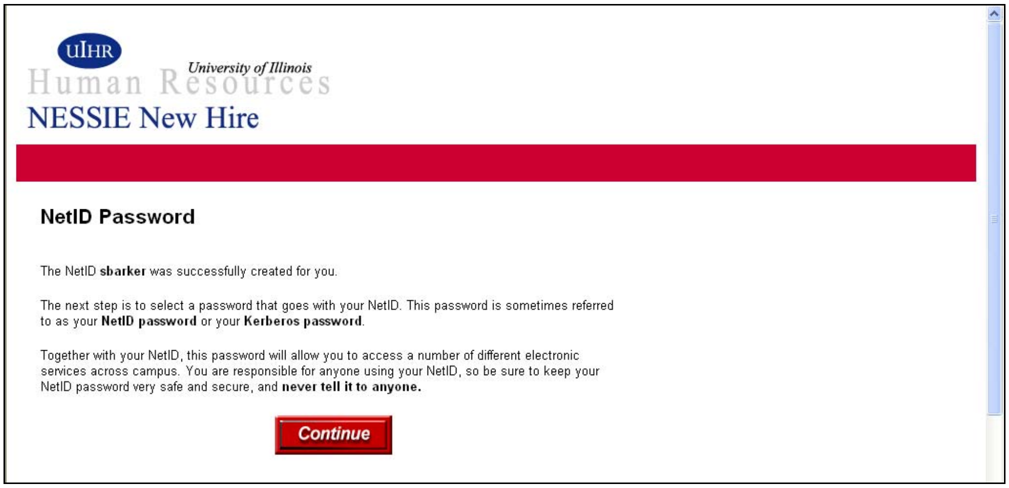
- The system will suggest a NetID based on your first and last name. Click in the radio button next to the suggested NetID, or click in the radio button next to the blank box to create your own NetID. You can create your own NetID by entering the desired NetID in the blank box.
- Click the **Continue** button.



The system will display the NetID you have selected.

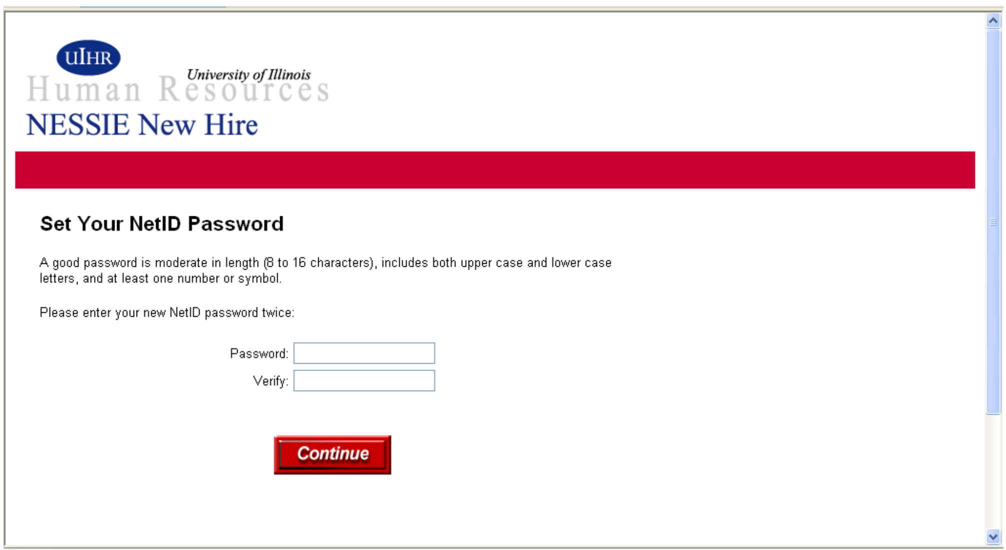
NOTE: If you chose to create your own NetID and picked a NetID that is already in use, you will receive a message from the system indicating that you will need to choose another NetID.

- Click the **Continue** button.

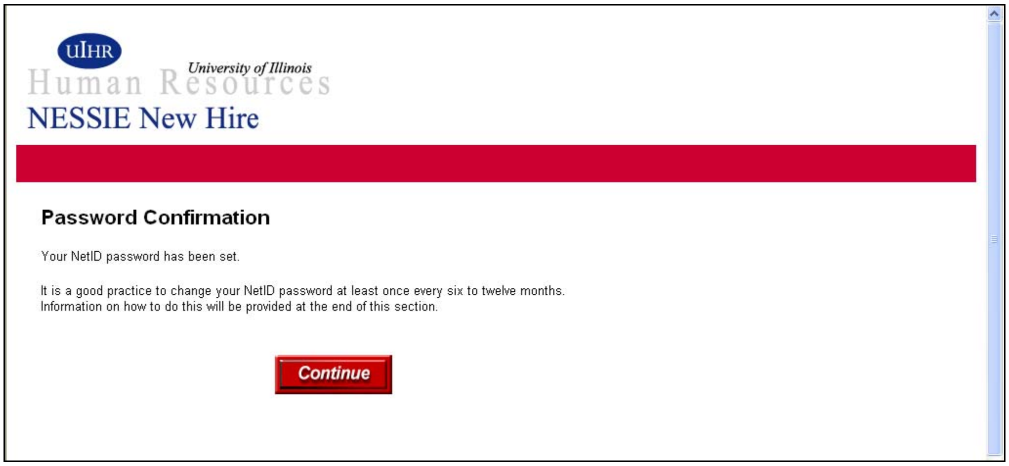


The system will confirm that the NetID has been successfully created.

- Click the **Continue** button.

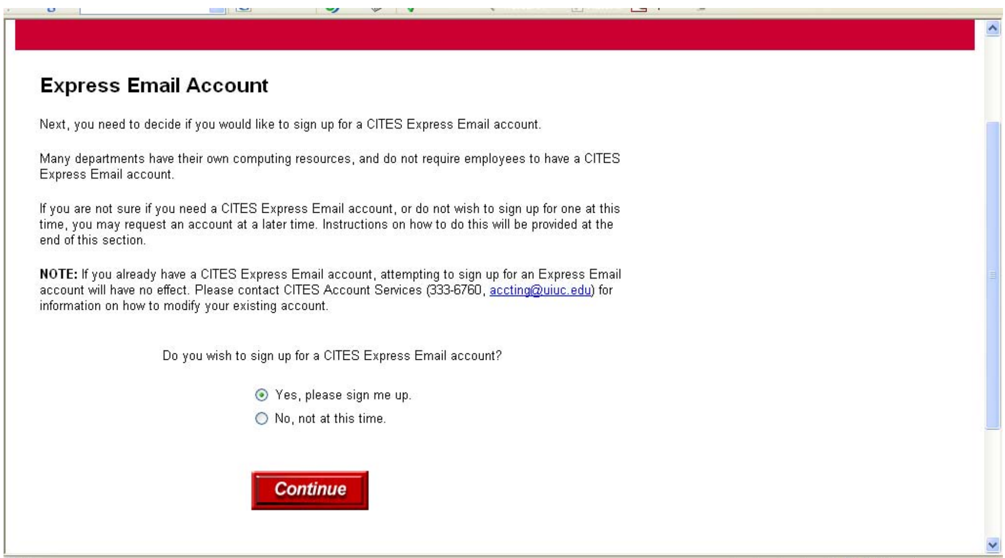


- Enter the **Password** you want for your NetID.
- Re-enter the **Password** you just created in order to verify it. Remember that this Password is case-sensitive.
- Click the **Continue** button.



- Review the **Password Confirmation** information.
- Click the **Continue** button to create an Express Email Account.

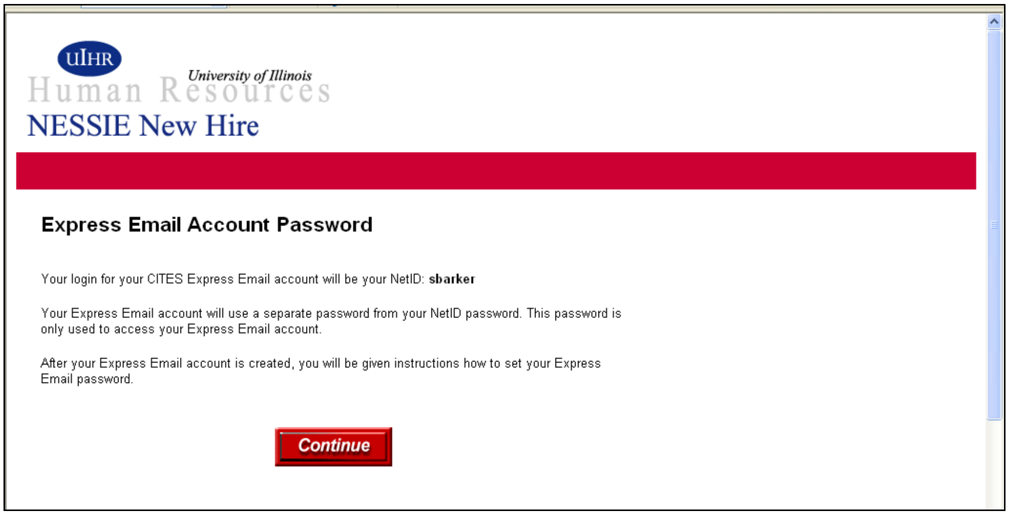
Creating an Express Email Account



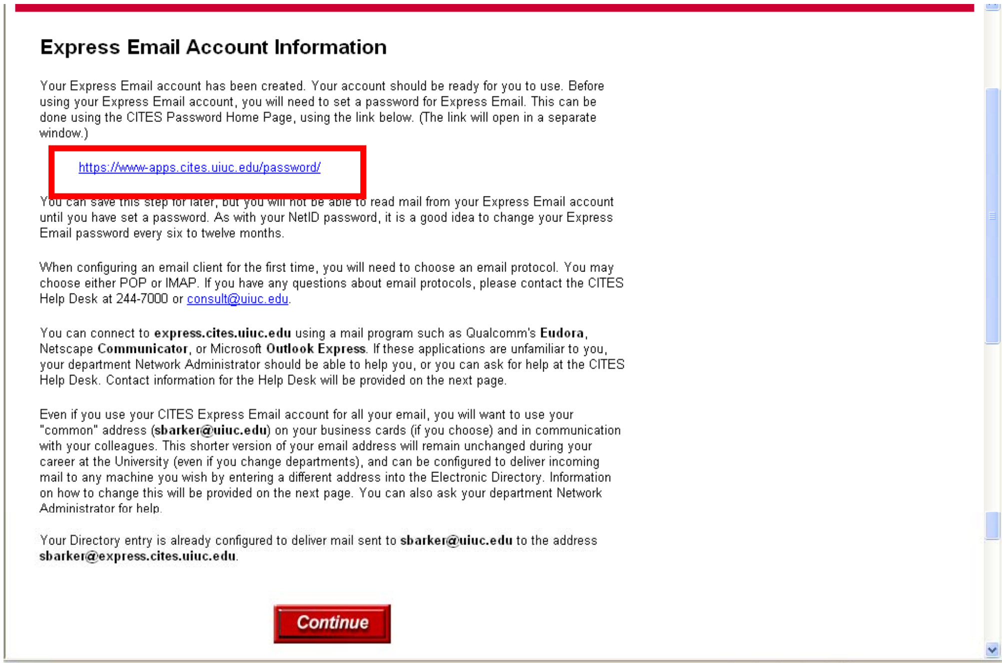
NOTE: If you are not sure if you need a CITES Express Email account, or do not wish to sign up for one at this time, you may request an account at a later time. Instructions on how to do this will be provided at the end of this section.

If you already have a CITES Express Email account, attempting to sign up for one will have no effect.

- After reviewing the Express Email Account information, select the radio button next to the option for creating an Express Email account: **Yes, please sign me up** or **No, not at this time**.
- Click the Continue button.



- If you chose to create a CITES Express Email account, you will see the screen above. Click the **Continue** button to set up your **CITES Express Email account password**.



Express Email Account Information

Your Express Email account has been created. Your account should be ready for you to use. Before using your Express Email account, you will need to set a password for Express Email. This can be done using the CITES Password Home Page, using the link below. (The link will open in a separate window.)

https://www-apps.cites.uiuc.edu/password/

You can save this step for later, but you will not be able to read mail from your Express Email account until you have set a password. As with your NetID password, it is a good idea to change your Express Email password every six to twelve months.

When configuring an email client for the first time, you will need to choose an email protocol. You may choose either POP or IMAP. If you have any questions about email protocols, please contact the CITES Help Desk at 244-7000 or consult@uiuc.edu.

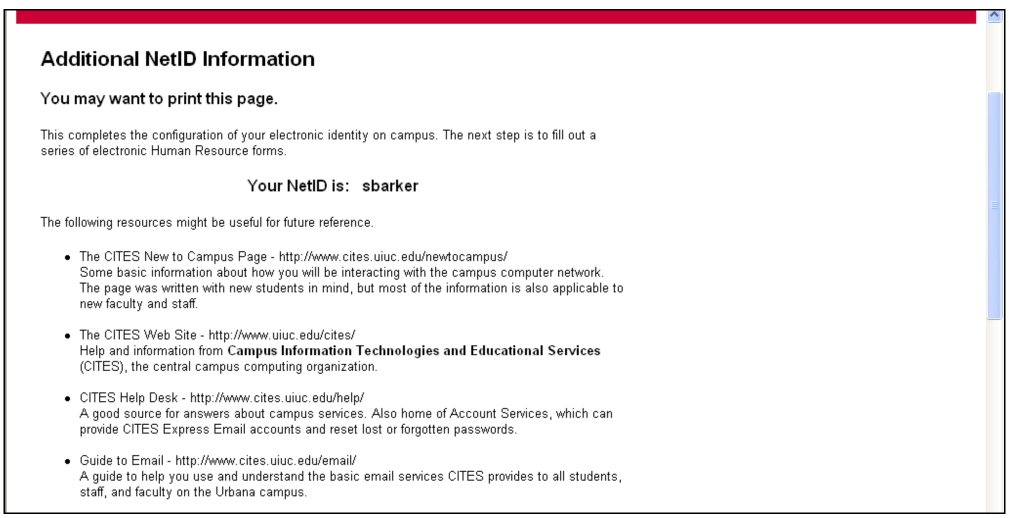
You can connect to **express.cites.uiuc.edu** using a mail program such as Qualcomm's **Eudora**, Netscape **Communicator**, or Microsoft **Outlook Express**. If these applications are unfamiliar to you, your department Network Administrator should be able to help you, or you can ask for help at the CITES Help Desk. Contact information for the Help Desk will be provided on the next page.

Even if you use your CITES Express Email account for all your email, you will want to use your "common" address (**sbarker@uiuc.edu**) on your business cards (if you choose) and in communication with your colleagues. This shorter version of your email address will remain unchanged during your career at the University (even if you change departments), and can be configured to deliver incoming mail to any machine you wish by entering a different address into the Electronic Directory. Information on how to change this will be provided on the next page. You can also ask your department Network Administrator for help.

Your Directory entry is already configured to deliver mail sent to **sbarker@uiuc.edu** to the address **sbarker@express.cites.uiuc.edu**.

Continue

- Click the link after the first paragraph in order to create your **CITES Express Email account password.**
- Click the **Continue** button.



Additional NetID Information

You may want to print this page.

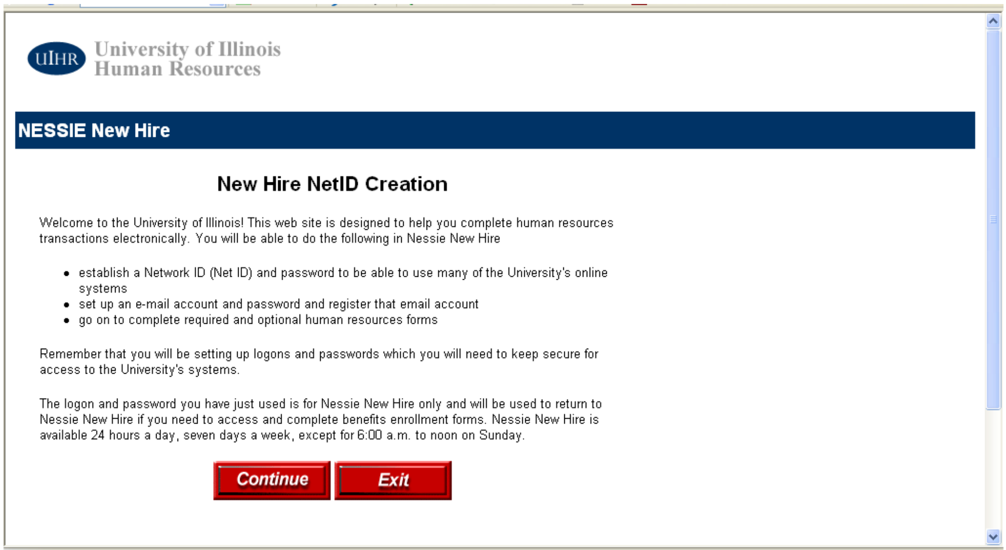
This completes the configuration of your electronic identity on campus. The next step is to fill out a series of electronic Human Resource forms.

Your NetID is: sbarker

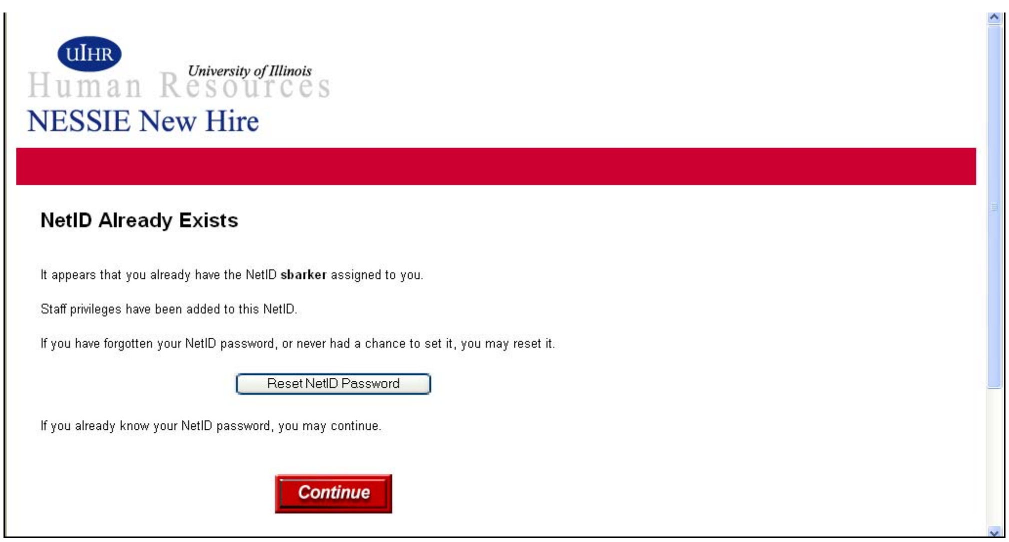
The following resources might be useful for future reference.

- The CITES New to Campus Page - http://www.cites.uiuc.edu/newtocampus/
  Some basic information about how you will be interacting with the campus computer network. The page was written with new students in mind, but most of the information is also applicable to new faculty and staff.
- The CITES Web Site - http://www.uiuc.edu/cites/
  Help and information from **Campus Information Technologies and Educational Services** (CITES), the central campus computing organization.
- CITES Help Desk - http://www.cites.uiuc.edu/help/
  A good source for answers about campus services. Also home of Account Services, which can provide CITES Express Email accounts and reset lost or forgotten passwords.
- Guide to Email - http://www.cites.uiuc.edu/email/
  A guide to help you use and understand the basic email services CITES provides to all students, staff, and faculty on the Urbana campus.

Creating a NetID if One Already Exists



- Read the information on the **New Hire NetID Creation** page.
- Click the **Continue** button.

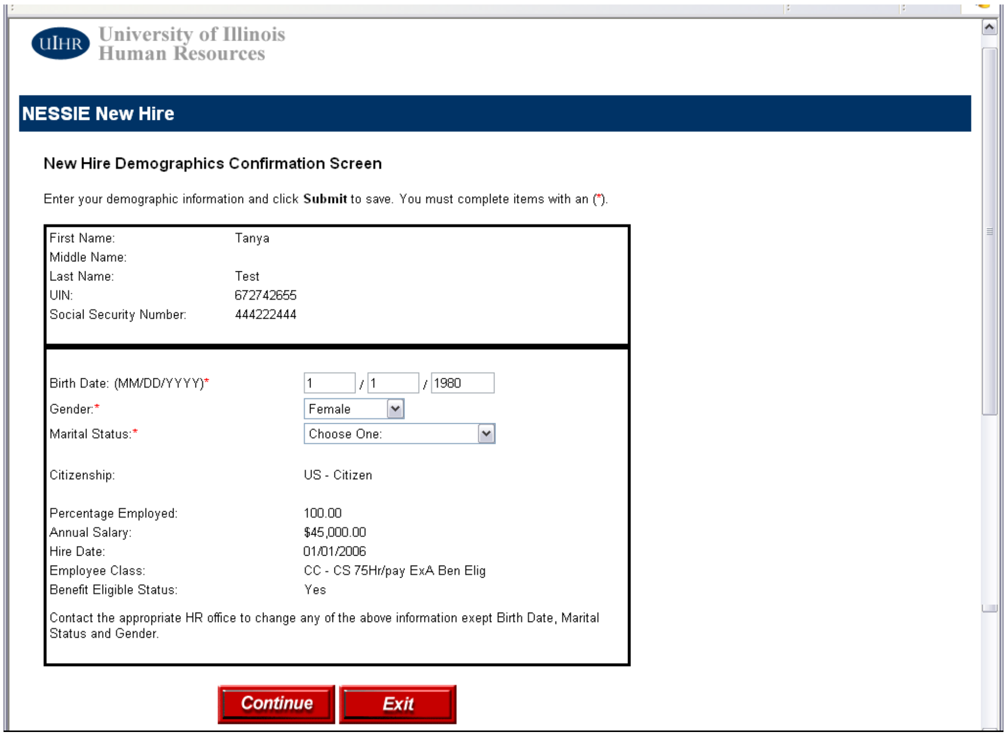


- You will receive the following message if you try to create a NetID and the system recognizes that you already have one.
- Click the **Reset NetID Password button** to reset your NetID Password.
- Click the **Continue** button to get back to NESSIE New Hire to do your new hire forms.

Demographic and Address Information

After completing the NetID creation process, you will be prompted to enter your demographic and address information. Employees that do not create a NetID through NESSIE New Hire will enter demographic and address information after changing their new hire password.

Demographic Information


UIHR University of Illinois Human Resources

NESSIE New Hire

New Hire Demographics Confirmation Screen

Enter your demographic information and click **Submit** to save. You must complete items with an (*).

First Name:	Tanya
Middle Name:	
Last Name:	Test
UIN:	672742655
Social Security Number:	444222444

Birth Date: (MM/DD/YYYY)*	1 / 1 / 1980
Gender:*	Female
Marital Status:*	Choose One:
Citizenship:	US - Citizen
Percentage Employed:	100.00
Annual Salary:	$45,000.00
Hire Date:	01/01/2006
Employee Class:	CC - CS 75Hr/pay ExA Ben Elig
Benefit Eligible Status:	Yes

Contact the appropriate HR office to change any of the above information exept Birth Date, Marital Status and Gender.

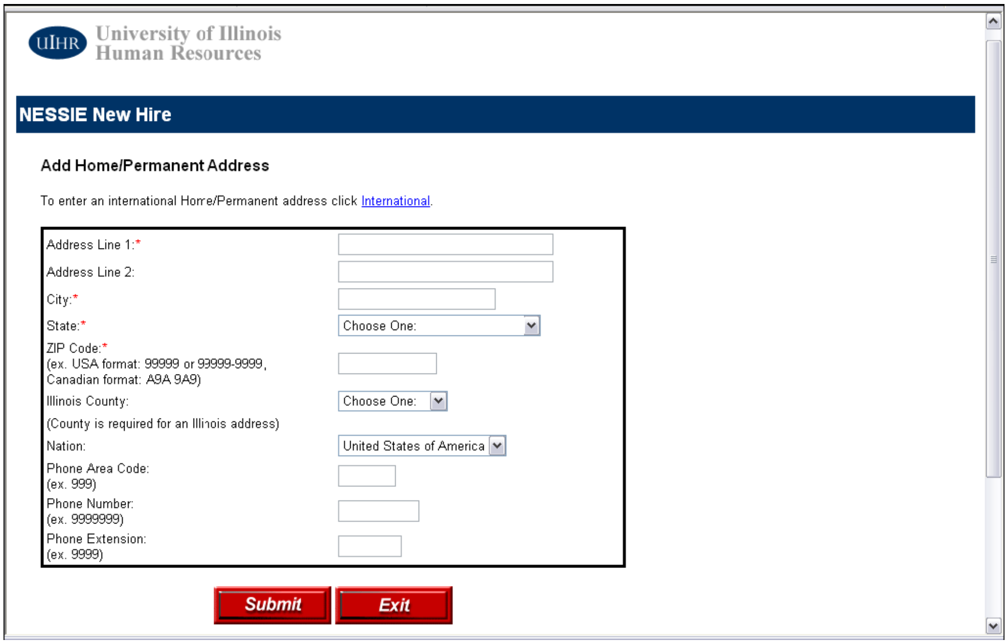
Continue Exit

Review the information in the top box to make sure it is correct. If it is not correct, contact your department.

NOTE: You must complete all fields marked with a red asterisk (*).

- Enter **Marital Status** information.
- Click the **Continue** button.

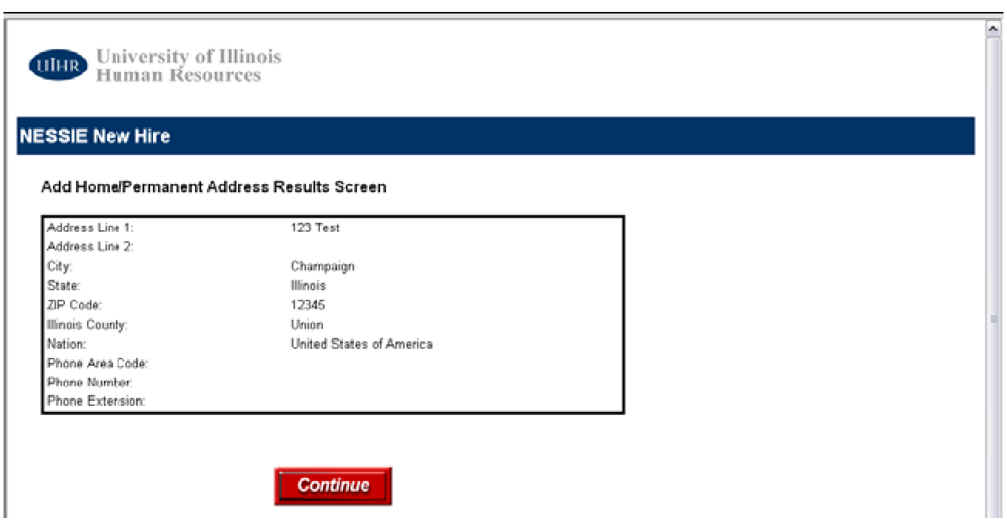
Address Information



- Enter **Home/Permanent Address** information.

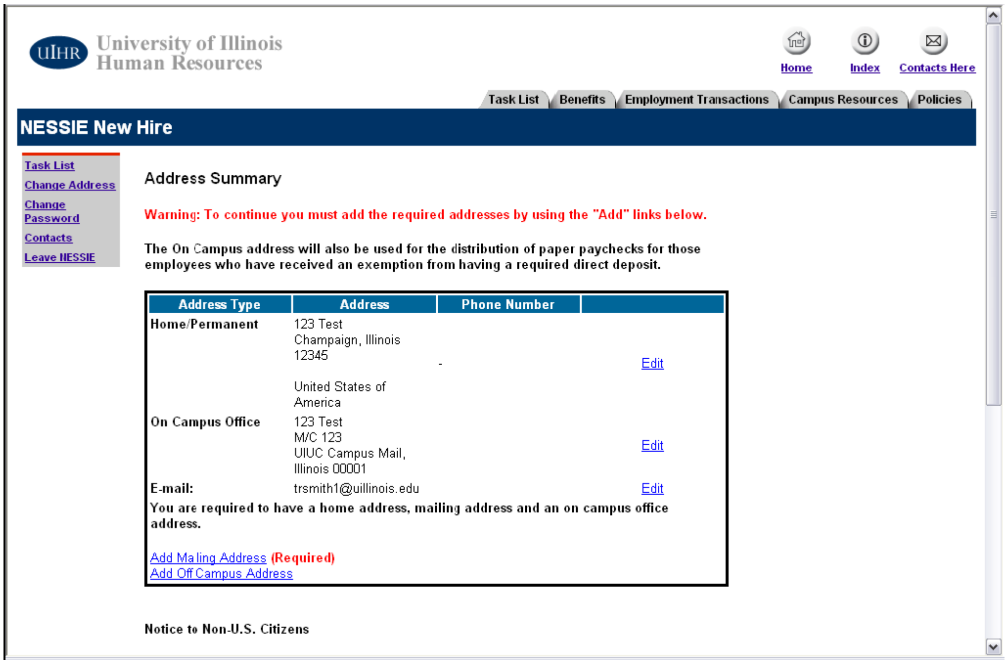
NOTE: You must complete all fields marked with a red asterisk (*).

- Click the **Submit** button.



You will receive an **Add Home/Permanent Address Results Screen**. Review the address information on this screen to make sure it was entered correctly.

- Click the **Continue** button.

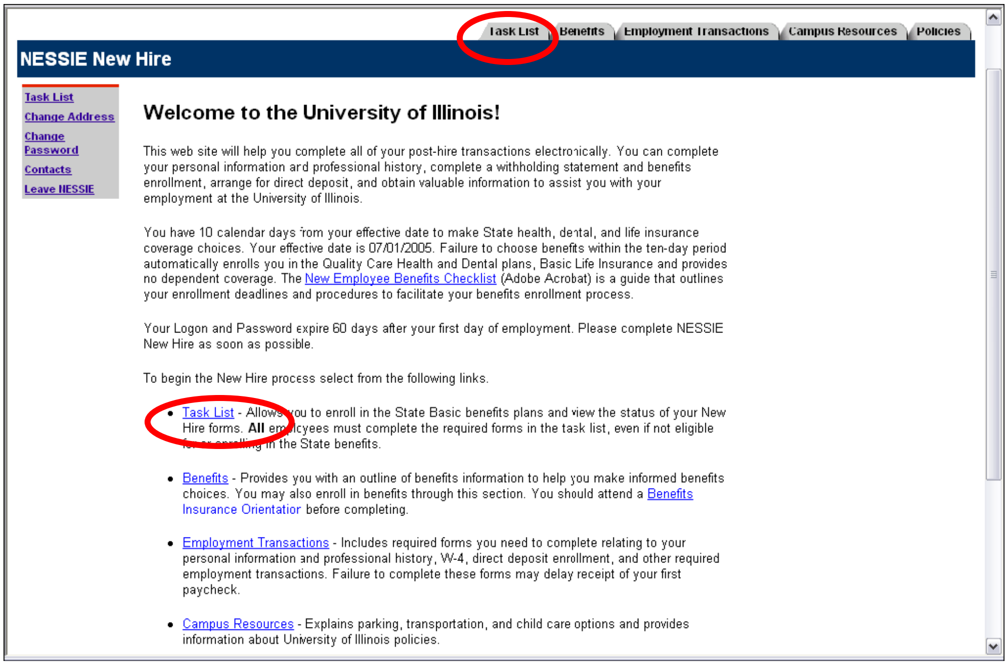


On the Address Summary page, you will see the addresses you have entered. If there is an address that still needs to be entered, you will see a link for that address with **(Required)** behind it.

- Click the link for **Add Mailing Address** to add that address.
- Click **Submit** after you have added the **Mailing Address**.

Completing New Hire Forms

After completing your demographic and address information you are ready to start completing your new hire forms. Read the information on this page before beginning your new hire forms.



To begin completing your new hire forms, you can:

- Click the **Task List Tab** at the top of the page

OR

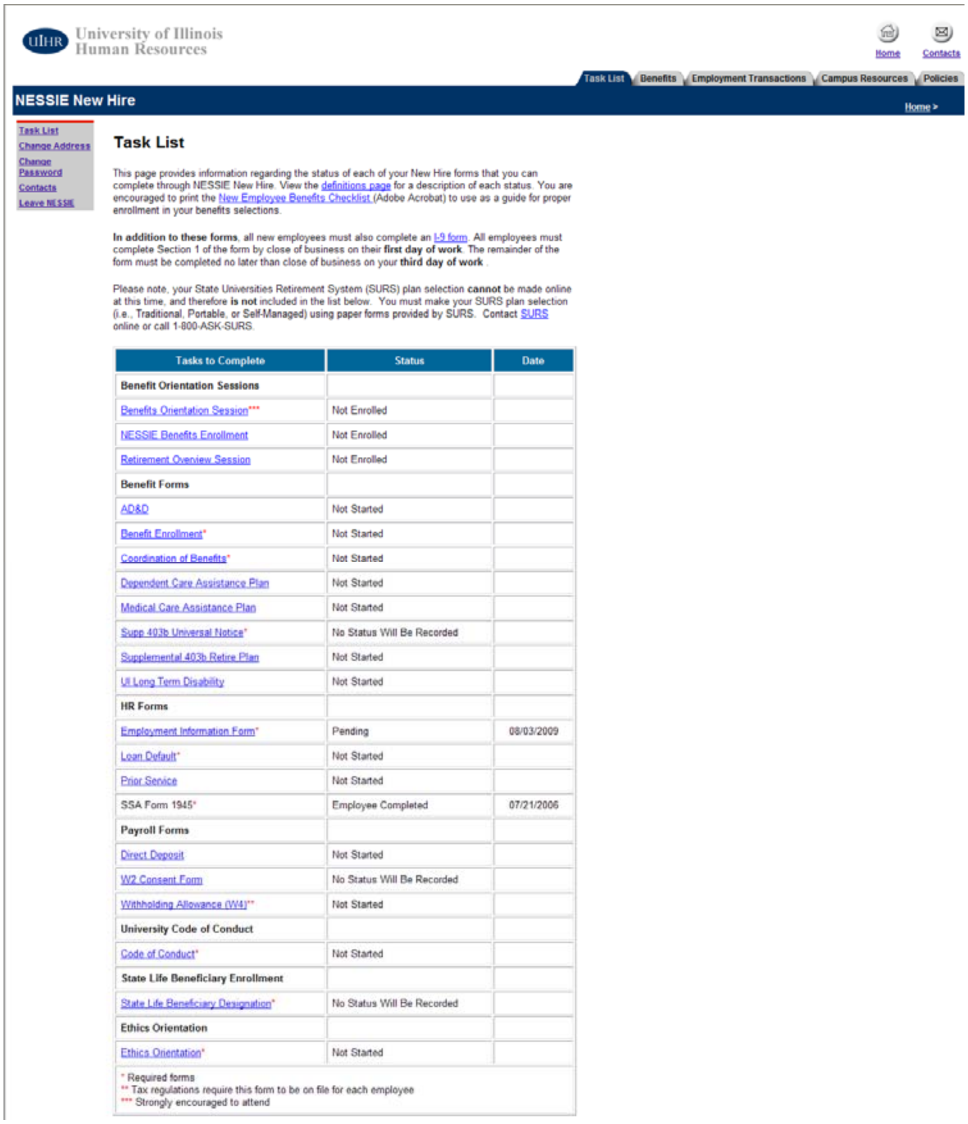
- Click the **Task List Link** from the page

The **Benefits** tab will allow you to view information about the benefits plans offered by the University.

The **Employment Transactions** tab is similar to the Task List tab and will allow you to complete your new hire forms.

The **Campus Resources** tab provides information on resources available to you as a University employee.

New Hire Task List



University of Illinois
Human Resources

Home Contacts

Task List | Benefits | Employment Transactions | Campus Resources | Policies

NESSIE New Hire Home >

Task List
Change Address
Change Password
Contacts
Leave NESSIE

Task List

This page provides information regarding the status of each of your New Hire forms that you can complete through NESSIE New Hire. View the definitions page for a description of each status. You are encouraged to print the New Employee Benefits Checklist (Adobe Acrobat) to use as a guide for proper enrollment in your benefits selections.

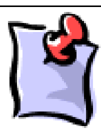
In addition to these forms, all new employees must also complete an I-9 form. All employees must complete Section 1 of the form by close of business on their **first day of work**. The remainder of the form must be completed no later than close of business on your **third day of work** .

Please note, your State Universities Retirement System (SURS) plan selection **cannot** be made online at this time, and therefore **is not** included in the list below. You must make your SURS plan selection (i.e., Traditional, Portable, or Self-Managed) using paper forms provided by SURS. Contact SURS online or call 1-800-ASK-SURS.

Tasks to Complete	Status	Date
Benefit Orientation Sessions		
Benefits Orientation Session***	Not Enrolled	
NESSIE Benefits Enrollment	Not Enrolled	
Retirement Overview Session	Not Enrolled	
Benefit Forms		
AD&D	Not Started	
Benefit Enrollment*	Not Started	
Coordination of Benefits*	Not Started	
Dependent Care Assistance Plan	Not Started	
Medical Care Assistance Plan	Not Started	
Supp 403b Universal Notice*	No Status Will Be Recorded	
Supplemental 403b Retire Plan	Not Started	
UI Long Term Disability	Not Started	
HR Forms		
Employment Information Form*	Pending	08/03/2009
Loan Default*	Not Started	
Prior Service	Not Started	
SSA Form 1945*	Employee Completed	07/21/2006
Payroll Forms		
Direct Deposit	Not Started	
W2 Consent Form	No Status Will Be Recorded	
Withholding Allowance (W4)**	Not Started	
University Code of Conduct		
Code of Conduct*	Not Started	
State Life Beneficiary Enrollment		
State Life Beneficiary Designation*	No Status Will Be Recorded	
Ethics Orientation		
Ethics Orientation*	Not Started	

* Required forms
** Tax regulations require this form to be on file for each employee
*** Strongly encouraged to attend

- Click on the link for the form you want to access



NOTE: You will only see the **Benefits Orientation Session** forms and **Benefit Forms** if you are Benefits Eligible.

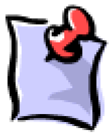
Unpaid employees will not see the **Payroll Forms**.

You must complete all fields marked with a red asterisk (*)

You will be able to view the **Status** and **Date** of your forms as you work on them:

- **Not Started** indicates that the form has not yet been started.
- **Not Enrolled** indicates that a Benefits Form has not been started or you have not enrolled to attend a Benefits Orientation.
- **Not Attended** indicates that you did not attend a Benefits Orientation.

- **Pending** indicates that the form has been started but has not yet been submitted.
- **Employee Completed** indicates that the form has been completed and submitted.
- The **Date** shows for the last time that form was accessed. If the form was submitted, the date will be the date it was submitted.



NOTE: After submitting any form, you will receive a confirmation page. Click the **Exit** button on the confirmation page to continue with your new hire forms.

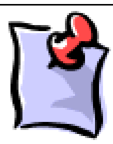
Benefits Orientation Sessions Forms

New hires may enroll in one or all of the following benefit orientation sessions:

Benefits Orientation Session – discusses the available health, dental, life, and retirement plans.

NESSIE Benefits Enrollment Session – allows new hires to make their benefits selections through NESSIE New Hire while an instructor is present.

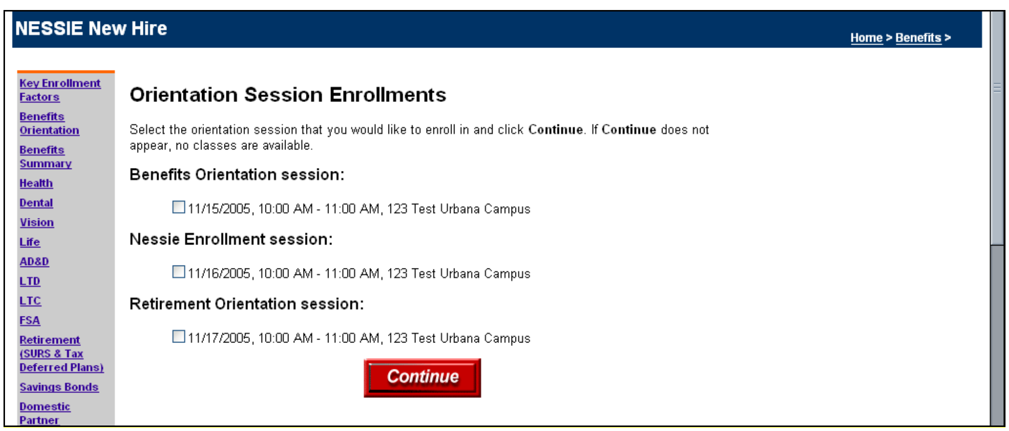
Retirement Overview Session – covers information regarding retirement.



NOTE: You are strongly encouraged to attend a **Benefits Orientation Session** before making your benefits choices.

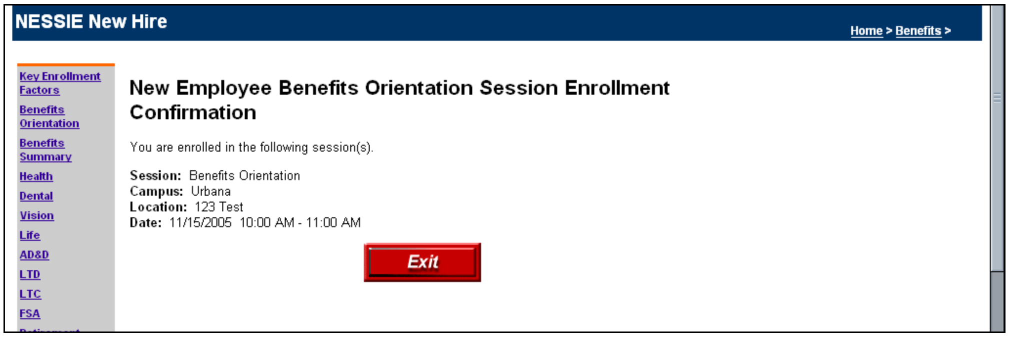
To enroll in an orientation session, choose the link from the **Task List** for the orientation session in which you want to enroll.

You will come to a page that shows the available orientation courses.



- Place a check in the checkbox for the course in which you want to enroll. You may enroll in one of each session.
- Click the **Continue** button.

You will receive a confirmation page letting you know you have been enrolled in the orientation session.

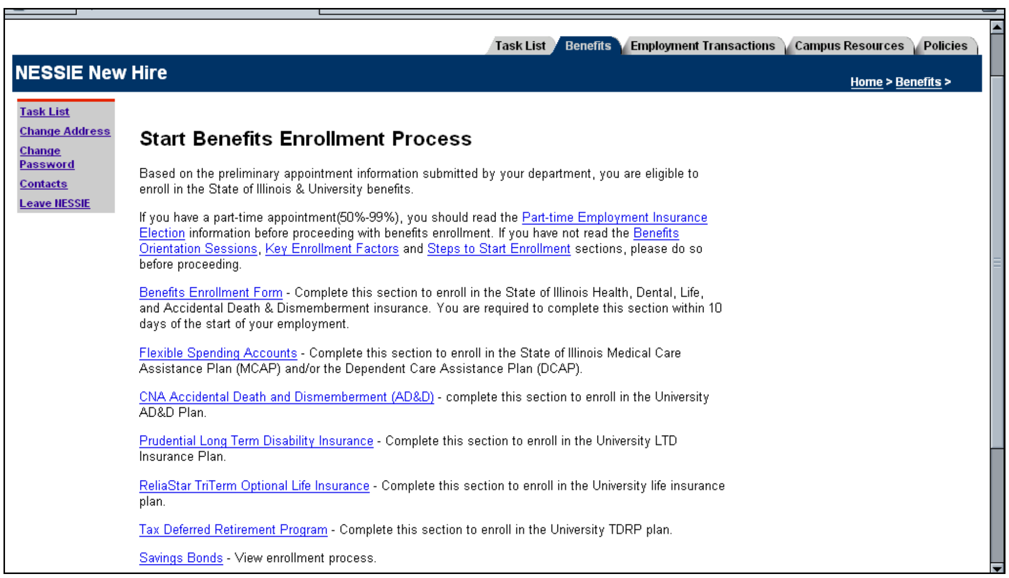


- Click the **Exit** button to return to the Benefits section of NESSIE New Hire.
- Click the **Task List** tab to get back into the Task List and continue with your benefits forms.

Benefits Forms

This section of the Task List in NESSIE New Hire will allow you to complete your Benefits Forms. To start completing forms in the Benefits Forms section of the Task List, click the link for the form you want to complete.

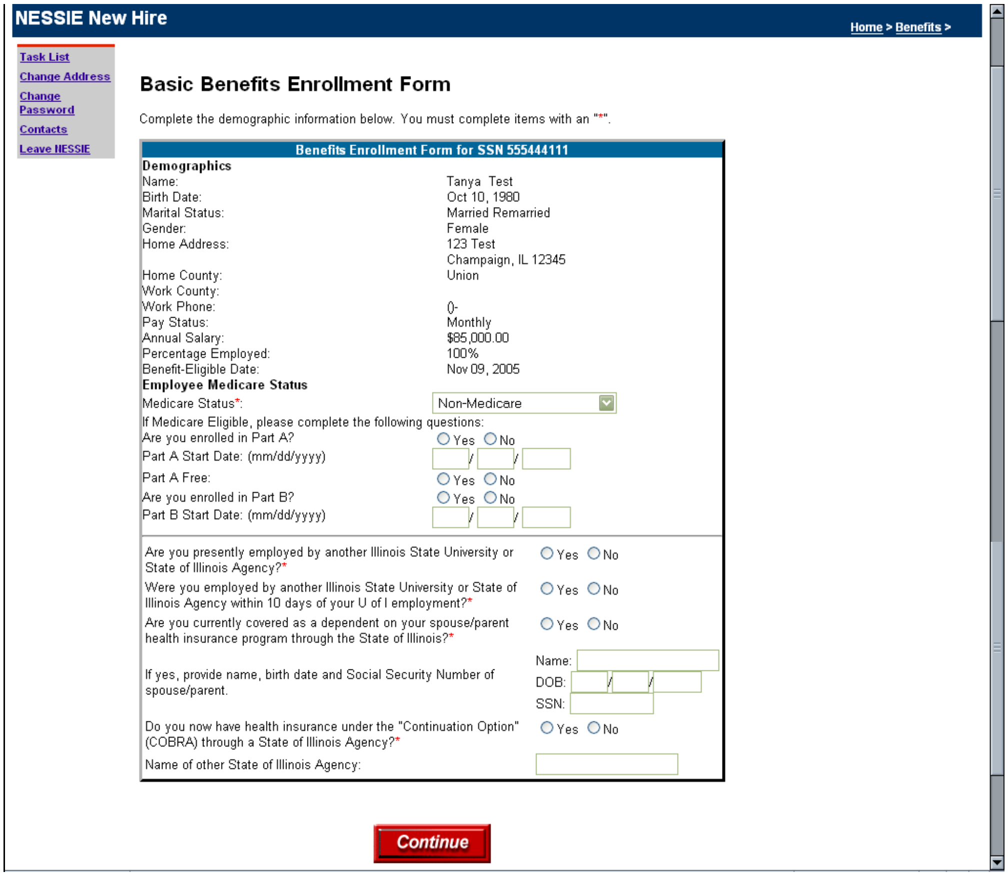
After clicking the link for a form in the Benefits Forms section of the Task List, you will come to the **Start Benefits Enrollment Process Page**. From here, click the link for the form you want to complete.



Benefit Enrollment

Complete this form to enroll in the State of Illinois **Health**, **Dental**, **Life**, and **Accidental Death & Dismemberment (AD&D)** insurance.

NOTE: You are required to complete this form within 10 days of the start of your employment.



NESSIE New Hire

Home > Benefits >

Task List
Change Address
Change Password
Contacts
Leave NESSIE

Basic Benefits Enrollment Form

Complete the demographic information below. You must complete items with an "*".

Benefits Enrollment Form for SSN 555444111

Demographics

Name:	Tanya Test
Birth Date:	Oct 10, 1980
Marital Status:	Married Remarried
Gender:	Female
Home Address:	123 Test Champaign, IL 12345
Home County:	Union
Work County:	
Work Phone:	()-
Pay Status:	Monthly
Annual Salary:	$85,000.00
Percentage Employed:	100%
Benefit-Eligible Date:	Nov 09, 2005

Employee Medicare Status

Medicare Status*: Non-Medicare

If Medicare Eligible, please complete the following questions:

Are you enrolled in Part A? Yes No

Part A Start Date: (mm/dd/yyyy) / /

Part A Free: Yes No

Are you enrolled in Part B? Yes No

Part B Start Date: (mm/dd/yyyy) / /

Are you presently employed by another Illinois State University or State of Illinois Agency?* Yes No

Were you employed by another Illinois State University or State of Illinois Agency within 10 days of your U of I employment?* Yes No

Are you currently covered as a dependent on your spouse/parent health insurance program through the State of Illinois?* Yes No

If yes, provide name, birth date and Social Security Number of spouse/parent. Name: DOB: / / SSN:

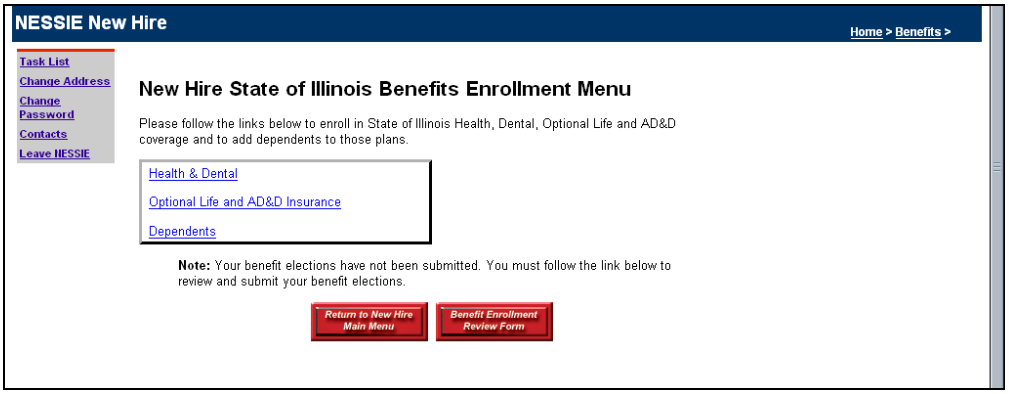
Do you now have health insurance under the "Continuation Option" (COBRA) through a State of Illinois Agency?* Yes No

Name of other State of Illinois Agency:

Continue

- Review your **Demographics** information.
- Select your **Medicare Status.** If Medicare Eligible, complete the following questions:
  - Are you Enrolled in Part A? If Yes, enter the **Part A Start Date and Part A Free**.
  - Are you enrolled in Part B? If Yes, enter the **Part B Start Date**.
- Indicate whether or not you are presently employed by another Illinois State University or State of Illinois Agency.
- Indicate whether or not you were employed by another Illinois State University or State of Illinois Agency within 10 days of your U of I employment.
- Indicate whether or not you are currently covered as a dependent on your spouse/parent health insurance program through the State of Illinois.
  - If yes, provide **name, birth date** and **Social Security Number** of spouse/parent.
- Indicate whether or not you currently have health insurance under the "Continuation Option" (COBRA) through a State of Illinois Agency.
  - If yes, enter the **Name** of other State of Illinois Agency.
- Click the **Continue** button.

You will come to the New Hire State of Illinois Benefits Enrollment Menu.



NESSIE New Hire

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New Hire State of Illinois Benefits Enrollment Menu

Please follow the links below to enroll in State of Illinois Health, Dental, Optional Life and AD&D coverage and to add dependents to those plans.

Health & Dental
Optional Life and AD&D Insurance
Dependents

Note: Your benefit elections have not been submitted. You must follow the link below to review and submit your benefit elections.

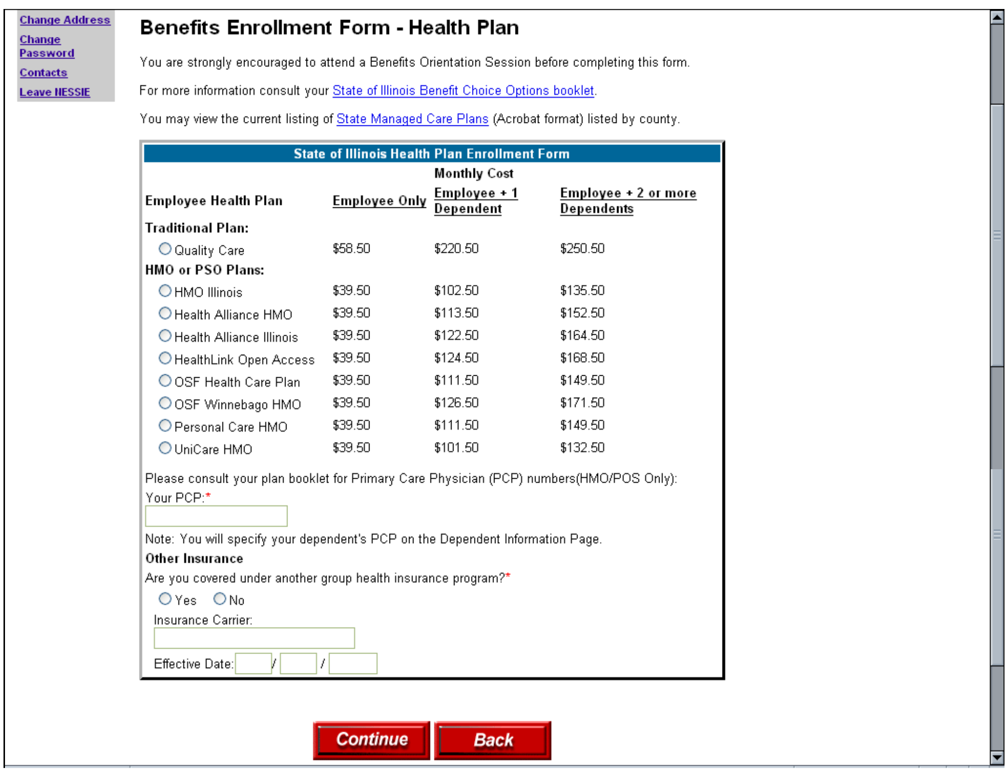
Return to New Hire Main Menu | Benefit Enrollment Review Form

- Click the **Health and Dental** link from the box to being completing that portion of the Benefits Enrollment Form.

NOTE: Once you complete a section of the Benefits Enrollment form, you will return to this main menu where you can click the link for the next section to complete. Any section that has been completed will have a checkmark next to the link for that section.

Once all sections are complete, click the **Benefits Enrollment Review Form** button to continue to the review page where you can submit your form.

Health and Dental – Health Plan



Change Address
Change Password
Contacts
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Benefits Enrollment Form - Health Plan

You are strongly encouraged to attend a Benefits Orientation Session before completing this form.

For more information consult your State of Illinois Benefit Choice Options booklet.

You may view the current listing of State Managed Care Plans (Acrobat format) listed by county.

State of Illinois Health Plan Enrollment Form

Employee Health Plan	Employee Only	Monthly Cost Employee + 1 Dependent	Employee + 2 or more Dependents
Traditional Plan:			
Quality Care	$58.50	$220.50	$250.50
HMO or PSO Plans:			
HMO Illinois	$39.50	$102.50	$135.50
Health Alliance HMO	$39.50	$113.50	$152.50
Health Alliance Illinois	$39.50	$122.50	$164.50
HealthLink Open Access	$39.50	$124.50	$168.50
OSF Health Care Plan	$39.50	$111.50	$149.50
OSF Winnebago HMO	$39.50	$126.50	$171.50
Personal Care HMO	$39.50	$111.50	$149.50
UniCare HMO	$39.50	$101.50	$132.50

Please consult your plan booklet for Primary Care Physician (PCP) numbers(HMO/POS Only):
Your PCP:*

Note: You will specify your dependent's PCP on the Dependent Information Page.

Other Insurance

Are you covered under another group health insurance program?*
Yes No
Insurance Carrier:
Effective Date: / /

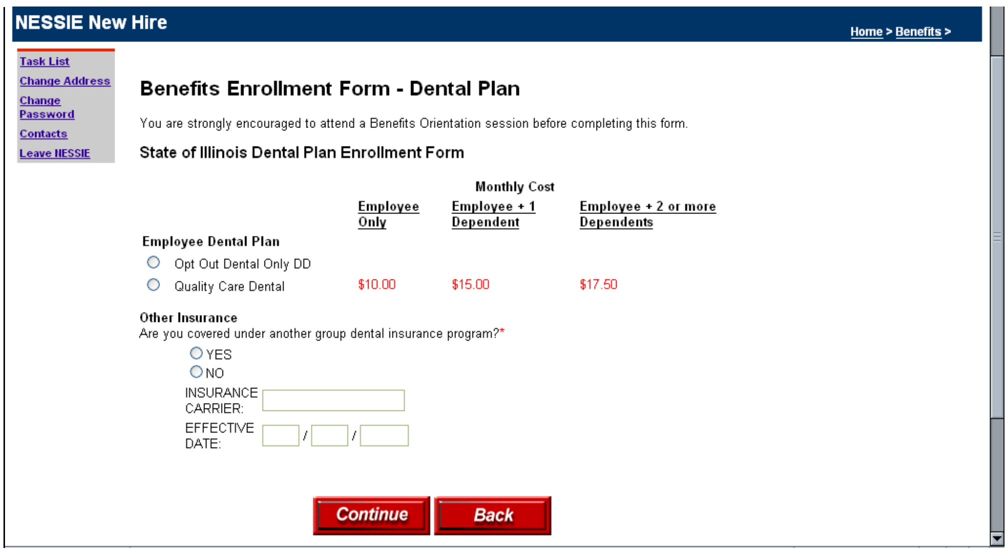
Continue | Back

- Select the radio button next to the **Traditional** or **HMO or POS Plan** in which you wish to enroll.
  - If you selected an HMO or POS plan, enter a **Primary Care Physician (PCP) number**. If you don't know this number, consult your plan booklet.

NOTE: You will specify your dependent's PCP on the Dependent Information Page.

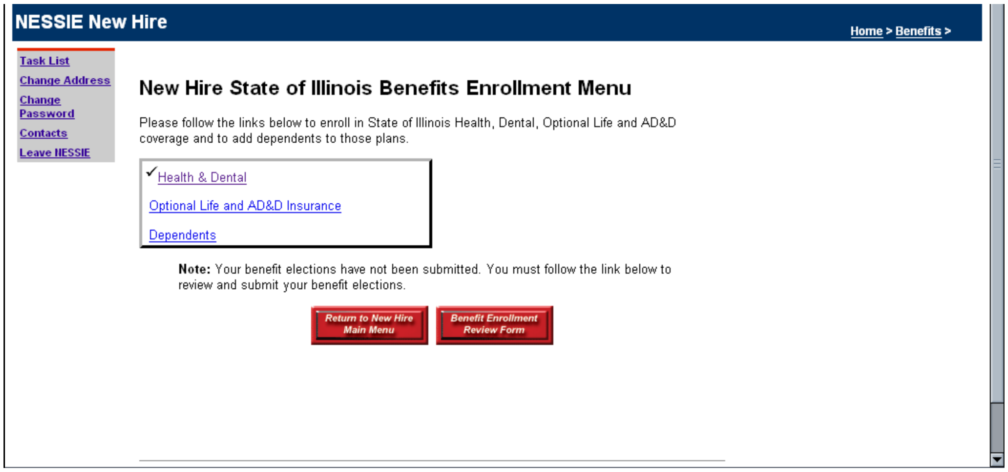
- Indicate whether or not you are covered under another group health insurance program.
- If yes, enter the **Insurance Carrier** and **Effective Date**.
- Click the **Continue** button.

Health and Dental – Dental Plan

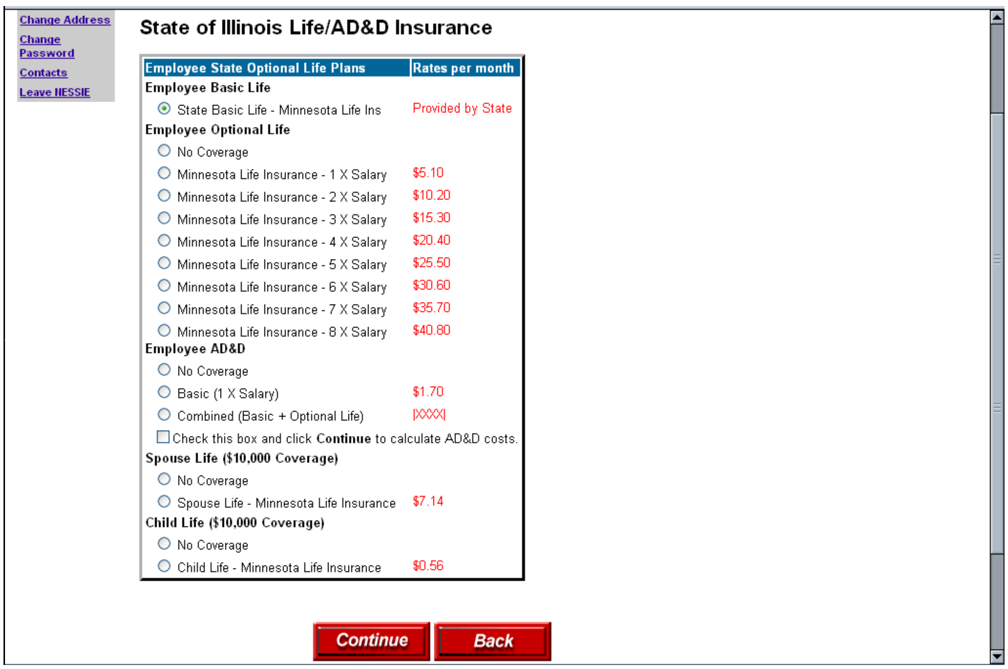


- Select **Opt Out Dental Only DD** to opt out of dental insurance.
- Select **Quality Care Dental** to enroll in Quality Care dental plan.
- Indicate whether or not you are covered under another group dental insurance plan.
    - o If yes, enter the **Insurance Carrier** and the **Effective Date**.
- Click the **Continue** button.

The Health and Dental section of the Benefits Enrollment form is now complete and is marked with a checkmark.



- Click the **Optional Life and AD&D Insurance** link.



Employee Basic Life

State Basic Life – Minnesota Life Ins. will already be selected. It is provided by the state at no cost to you.

Employee Optional Life

- Select **No Coverage** if you do not want additional Employee Optional Life insurance
- If you would like additional Employee Optional Life insurance, select the amount you would like.

Employee Accidental Death and Dismemberment (AD&D)

- Select **No Coverage** if you do not want Employee AD&D.

- If you would like Employee AD&D coverage, select the amount you would like.
    - If you choose **Combined (Basic + Optional Life)**, click the checkbox below the Combined AD&D and click the **Continue** button to calculate the AD&D costs.

Spouse Life Insurance

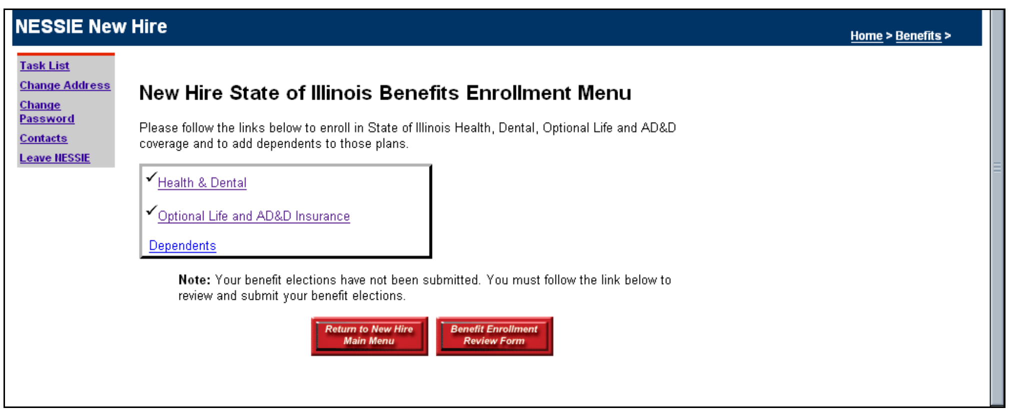
- Select **No Coverage** if you do not want Spouse Life insurance.
- Select the radio button next to **Spouse Life** if you want $10,000 spouse life coverage.

Child Life Insurance

- Select **No Coverage** if you do not want Child Life insurance.
- Select the radio button next to **Child Life** if you want $10,000 child life coverage.
-

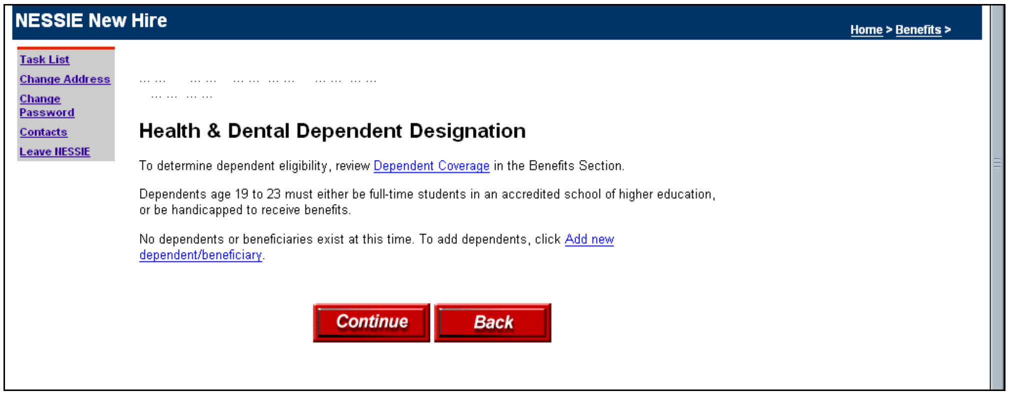
After making your Life and AD&D selections, click the **Continue** button.

You will return to the New Hire State of Illinois Benefits Enrollment Menu.

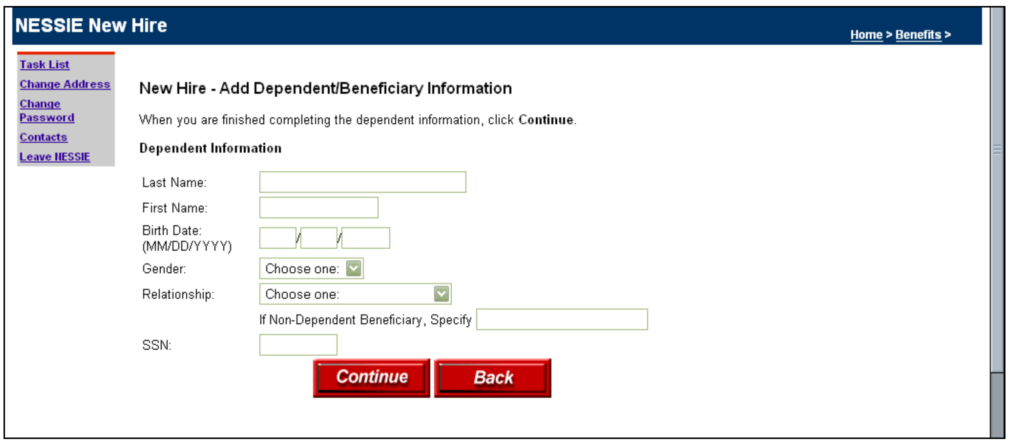


- Click the **Dependents** link to add any dependents you have.

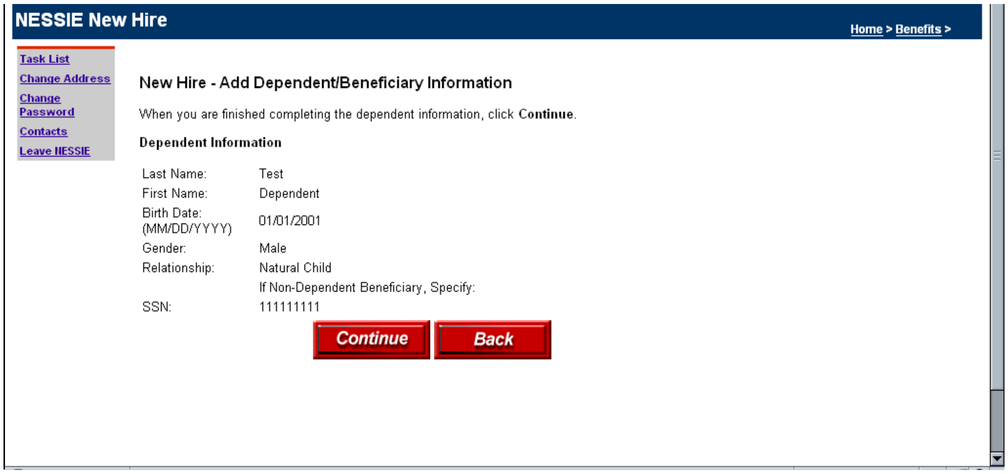
> **NOTE**: If you do not have dependents, click the **Benefit Enrollment Review Form** button to review your benefits selections.



- Click the **Add new dependent/beneficiary** link to add a new dependent/beneficiary.
- Click the **Continue** button to return to the benefits enrollment form main menu.
- Click the **Back** button to go back one page.

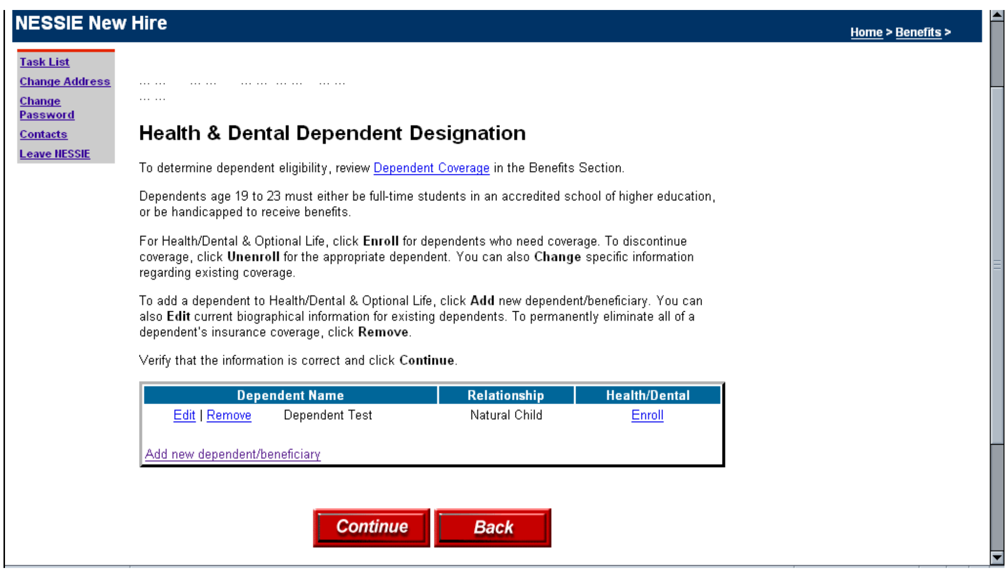


- Enter Dependent Information:
  - **Last Name.**
  - **First Name.**
  - **Birth Date.**
  - **Gender.**
  - **Relationship. If non-dependent beneficiary, specify.**
  - **SSN.**
- Click the **Continue** button.



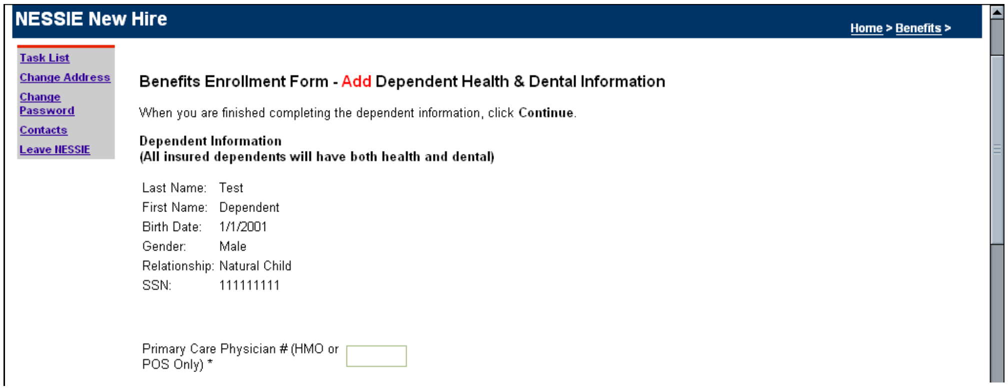
- Review the Dependent Information.
- Click the **Continue** button.

You will come to the Health and Dental Dependent Designation page where you can enroll your dependent in health and dental coverage.



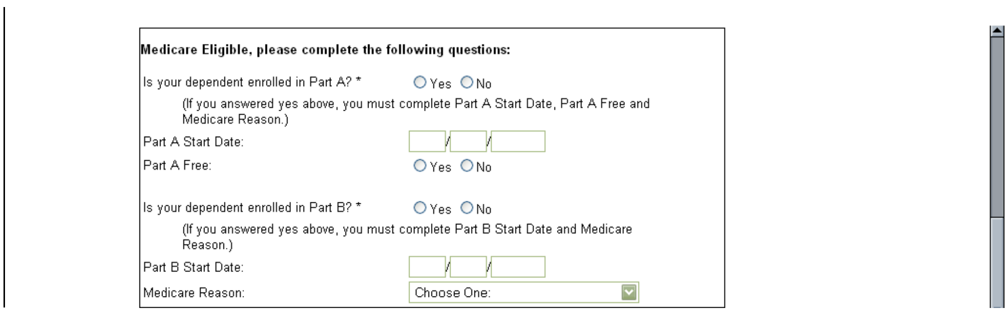
- Click the **Edit** link to edit dependent information.
- Click the **Remove** link to remove the dependent.
- Click the **Add new dependent/beneficiary** link to add another dependent.
- Click the **Enroll** link to enroll the dependent in health and dental coverage.

Dependent Enrollment



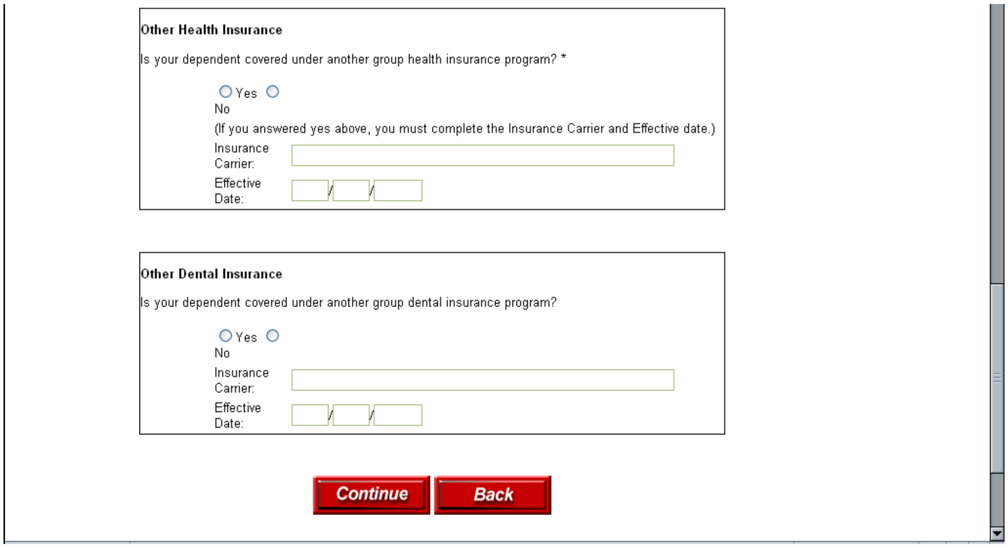
- Enter a **Primary Care Physician (PCP) number** for the dependent (HMO or POS only).

Medicare Eligibility



- Indicate whether your dependent is enrolled in **Medicare Part A**.
  - o If Yes, enter the **Part A Start Date, Part A Free, and Medicare Reason**.
- Indicate whether your dependent is enrolled in **Medicare Part B**.
  - o If Yes, enter the **Part B Start Date** and the **Medicare Reason**.

Other Health or Dental Insurance

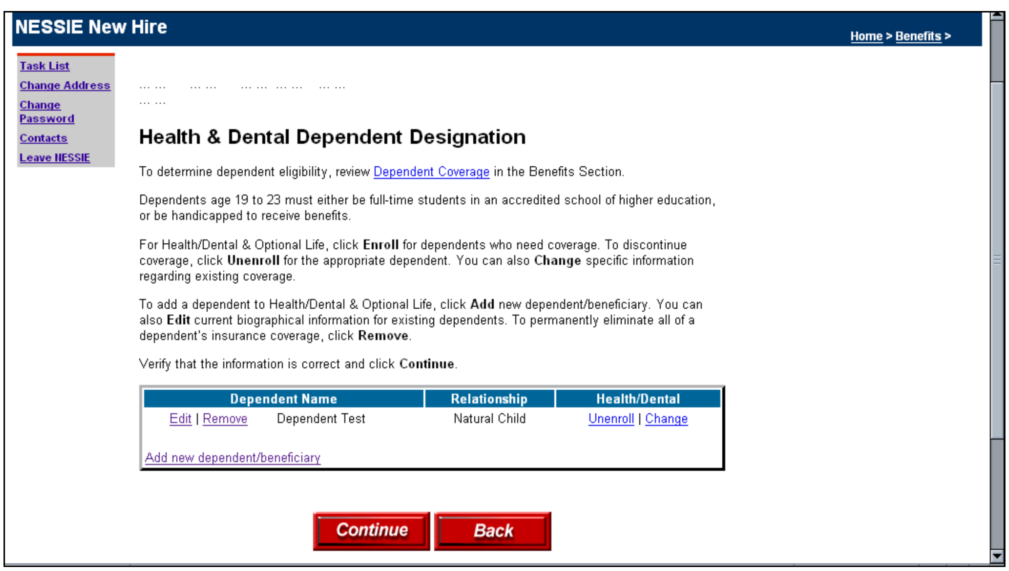


- Indicate whether or not the dependent is covered under another group health or dental insurance program.
- If yes, enter the **Insurance Carrier** and **Effective Date**.

After entering all information on the Add Dependent Health and Dental Information form, click the **Continue** button.

You will come to a dependent health/dental review page. Review the dependent health and dental information you entered and click the **Continue** button.

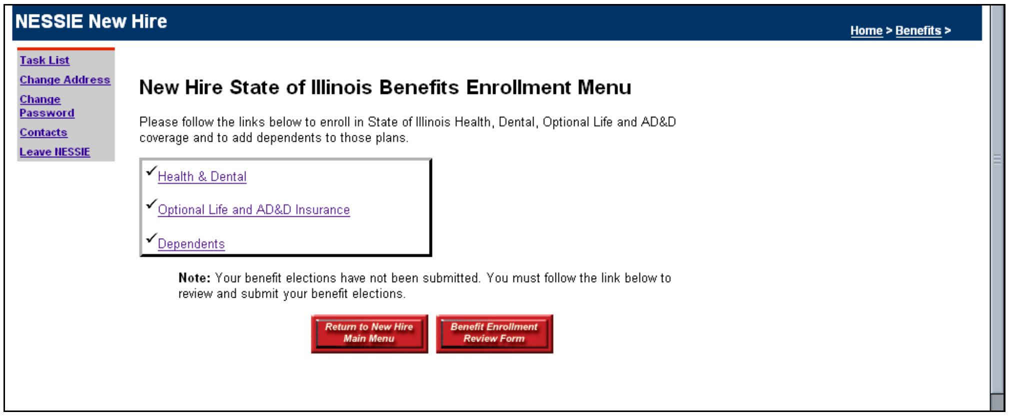
You will return to the **Health and Dental Dependent Designation** page.



- Click **Unenroll** to unenroll your dependent from health and dental coverage.

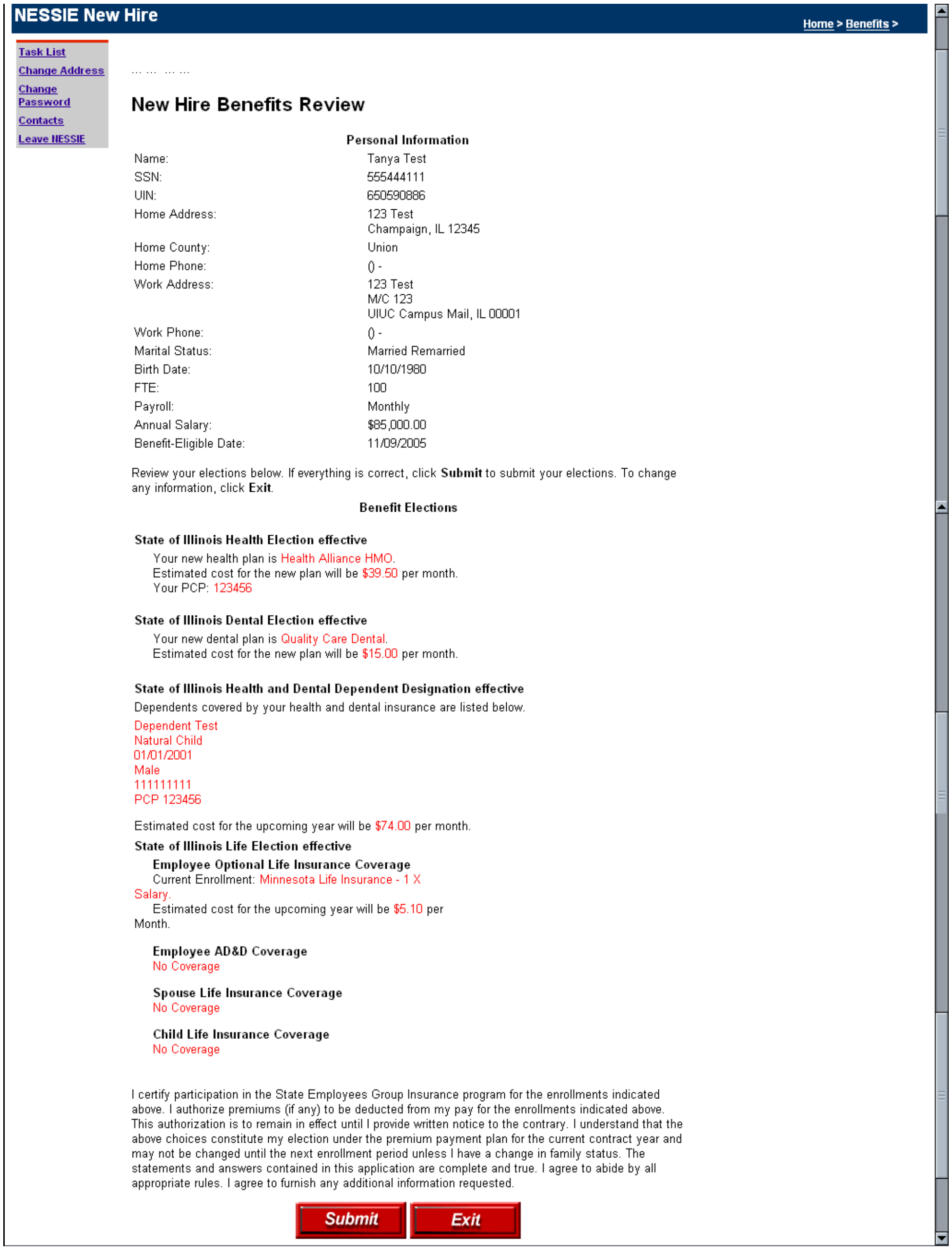
- Click **Change** to change specific information regarding your dependent's health and dental coverage.
- Click the **Continue** button.

You will return to the **New Hire State of Illinois Benefits Enrollment Menu**.



All sections of the benefits enrollment form have been completed and are indicated with a checkmark.

- Click the **Benefit Enrollment Review Form** button to go to the Benefits Review page.



NESSIE New Hire

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... ...

New Hire Benefits Review

Personal Information

Name:	Tanya Test
SSN:	555444111
UIN:	650590886
Home Address:	123 Test Champaign, IL 12345
Home County:	Union
Home Phone:	() -
Work Address:	123 Test M/C 123 UIUC Campus Mail, IL 00001
Work Phone:	() -
Marital Status:	Married Remarried
Birth Date:	10/10/1980
FTE:	100
Payroll:	Monthly
Annual Salary:	$85,000.00
Benefit-Eligible Date:	11/09/2005

Review your elections below. If everything is correct, click **Submit** to submit your elections. To change any information, click **Exit**.

Benefit Elections

State of Illinois Health Election effective
Your new health plan is Health Alliance HMO.
Estimated cost for the new plan will be $39.50 per month.
Your PCP: 123456

State of Illinois Dental Election effective
Your new dental plan is Quality Care Dental.
Estimated cost for the new plan will be $15.00 per month.

State of Illinois Health and Dental Dependent Designation effective
Dependents covered by your health and dental insurance are listed below.
Dependent Test
Natural Child
01/01/2001
Male
111111111
PCP 123456

Estimated cost for the upcoming year will be $74.00 per month.

State of Illinois Life Election effective
Employee Optional Life Insurance Coverage
Current Enrollment: Minnesota Life Insurance - 1 X Salary.
Estimated cost for the upcoming year will be $5.10 per Month.

Employee AD&D Coverage
No Coverage

Spouse Life Insurance Coverage
No Coverage

Child Life Insurance Coverage
No Coverage

I certify participation in the State Employees Group Insurance program for the enrollments indicated above. I authorize premiums (if any) to be deducted from my pay for the enrollments indicated above. This authorization is to remain in effect until I provide written notice to the contrary. I understand that the above choices constitute my election under the premium payment plan for the current contract year and may not be changed until the next enrollment period unless I have a change in family status. The statements and answers contained in this application are complete and true. I agree to abide by all appropriate rules. I agree to furnish any additional information requested.

Submit Exit

Review your Benefits selections.

NOTE: All new benefits selections will be noted in Red.

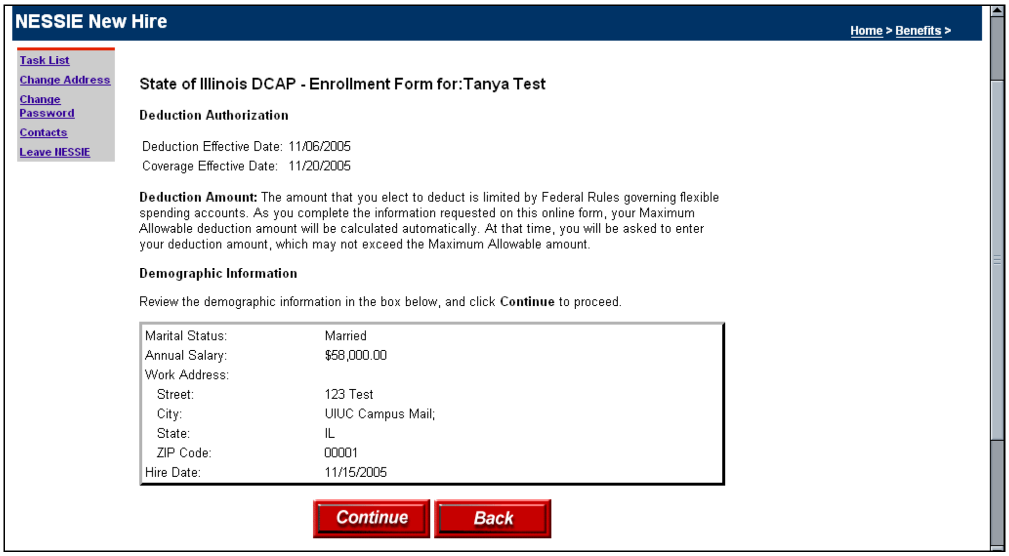
- Click the **Submit** button to submit your Benefits Enrollment Form.

Flexible Spending Accounts (FSAs)

The University of Illinois offers two Flexible Spending Accounts (FSAs), the Dependent Care Assistance Plan (DCAP) and the Medical Care Assistance Plan (MCAP).

These FSAs allow you to deduct pre-tax dollars to pay for dependent or medical care.

Dependent Care Assistance Program (DCAP)



NESSIE New Hire

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State of Illinois DCAP - Enrollment Form for:Tanya Test

Deduction Authorization

Deduction Effective Date: 11/06/2005
Coverage Effective Date: 11/20/2005

Deduction Amount: The amount that you elect to deduct is limited by Federal Rules governing flexible spending accounts. As you complete the information requested on this online form, your Maximum Allowable deduction amount will be calculated automatically. At that time, you will be asked to enter your deduction amount, which may not exceed the Maximum Allowable amount.

Demographic Information

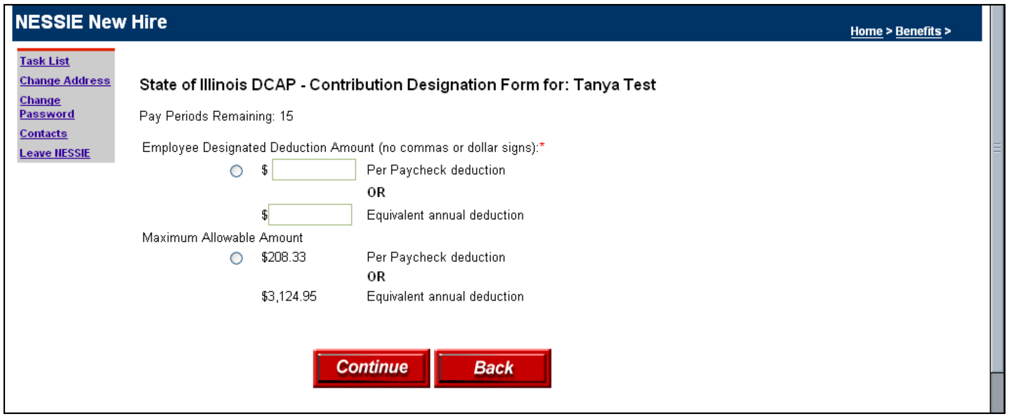
Review the demographic information in the box below, and click **Continue** to proceed.

Marital Status:	Married
Annual Salary:	$58,000.00
Work Address:	
Street:	123 Test
City:	UIUC Campus Mail;
State:	IL
ZIP Code:	00001
Hire Date:	11/15/2005

Continue Back

NOTE: The amount that you elect to deduct is limited by Federal Rules governing flexible spending accounts. As you complete the information requested on this online form, your Maximum Allowable deduction amount will be calculated automatically. At that time, you will be asked to enter your deduction amount, which may not exceed the Maximum Allowable amount.

- Review the Demographic Information.
- Click the **Continue** button.



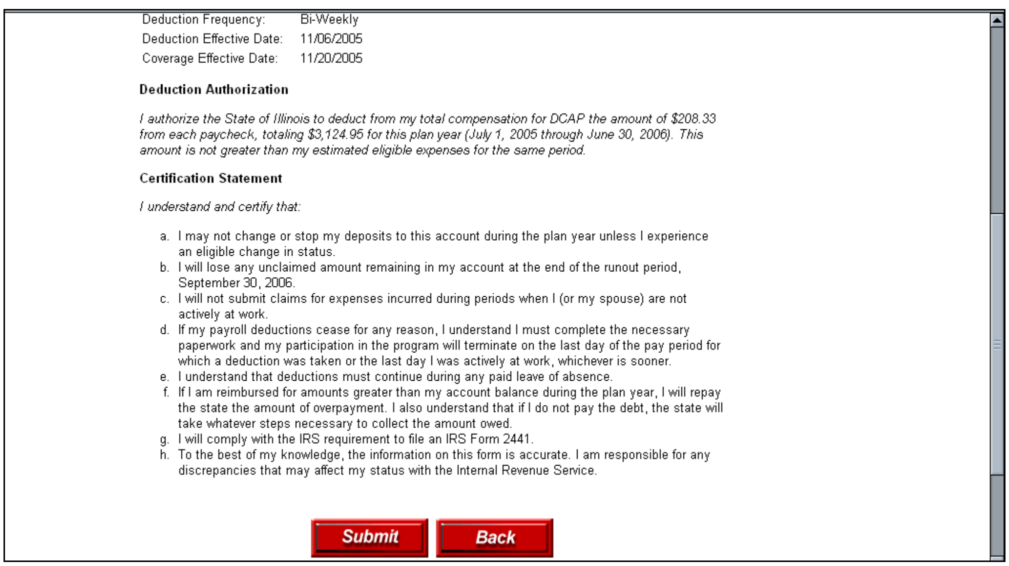
- Select a **Designated Deduction Amount** by clicking the radio button for that option.
  - Enter a **Per Paycheck deduction** amount.

    or
  - Enter an **Equivalent annual deduction**.

OR

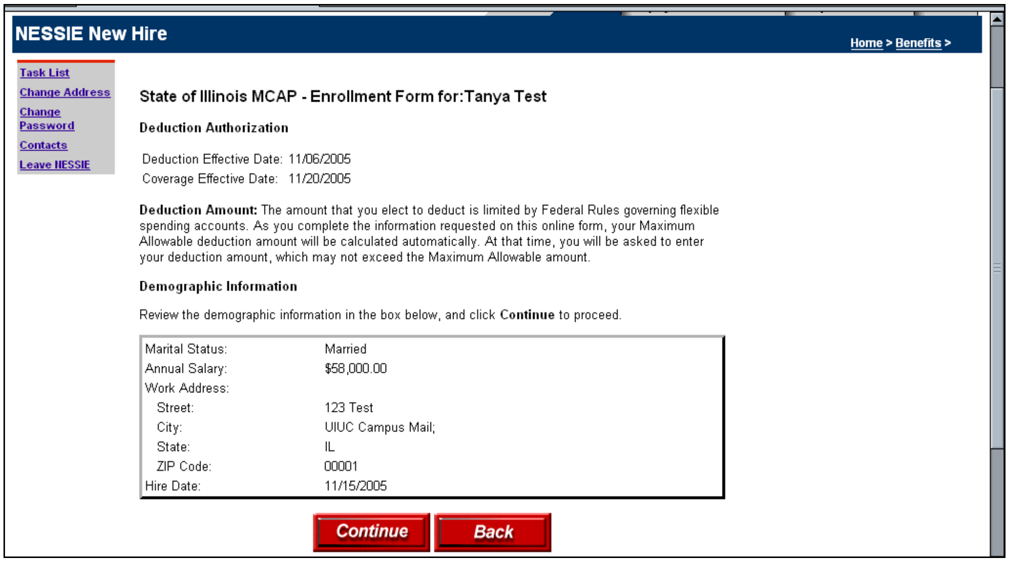
- Select the **Maximum Allowable Amount** by clicking the radio button for that option.
- Click the **Continue** button after selecting your deduction amount.

You will come to a **DCAP Review Page**.



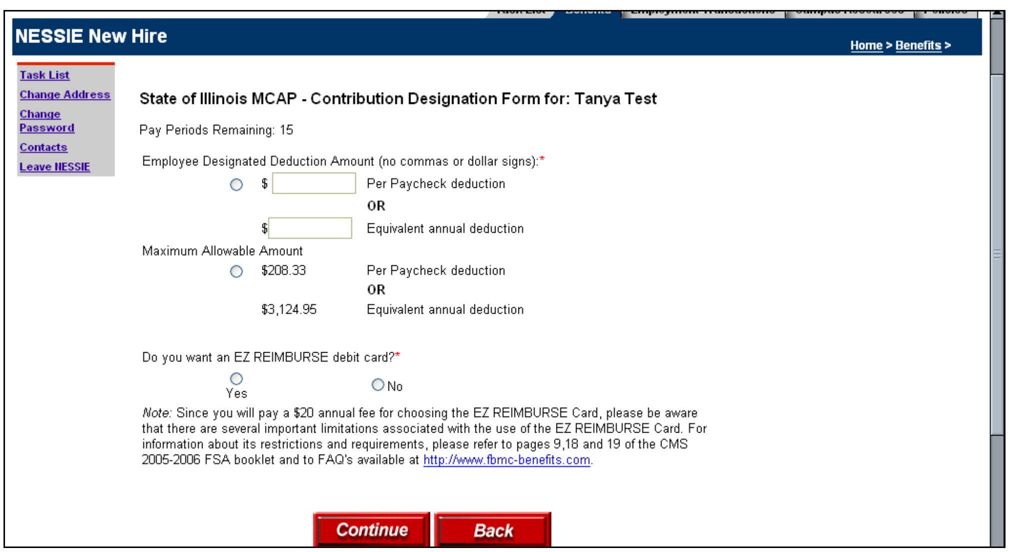
- Verify the **Deduction Authorization**.
- Read the **Certification Statement**.
- Click the **Submit** button to submit the DCAP form.

Medical Care Assistance Program (MCAP)



NOTE: The amount that you elect to deduct is limited by Federal Rules governing flexible spending accounts. As you complete the information requested on this online form, your Maximum Allowable deduction amount will be calculated automatically. At that time, you will be asked to enter your deduction amount, which may not exceed the Maximum Allowable amount.

- Review the Demographic Information.
- Click the **Continue** button.



- Select a **Designated Deduction Amount** by clicking the radio button for that option.
  - Enter a **Per Paycheck deduction** amount.

    or
  - Enter an **Equivalent annual deduction**.

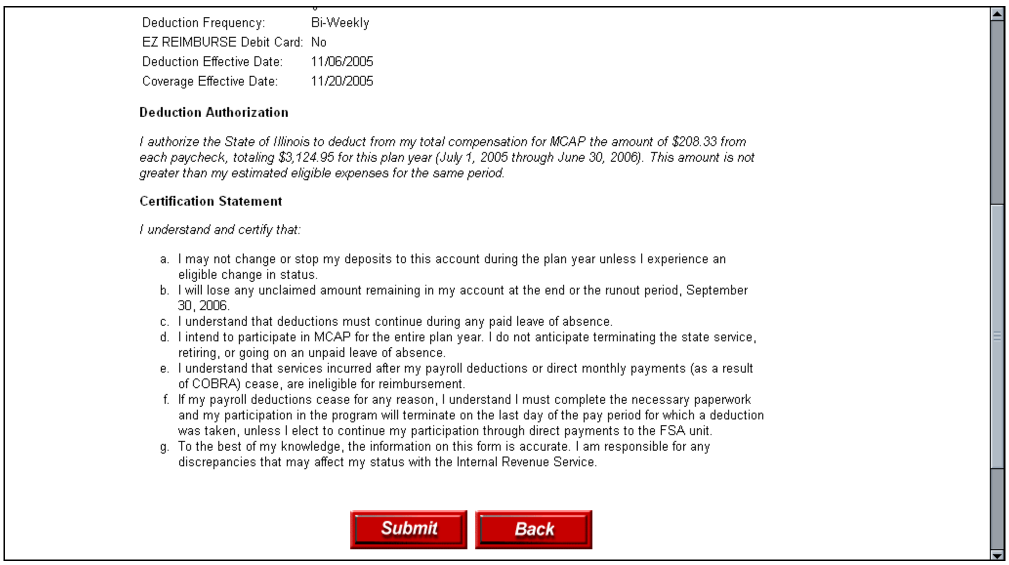
OR

- Select the **Maximum Allowable Amount** by clicking the radio button for that option.
- Indicate if you want an **EZ REIMBURSE** debit card?

NOTE: Since you will pay a $20 annual fee for choosing the EZ REIMBURSE Card, please be aware that there are several important limitations associated with the use of the EZ REIMBURSE Card. For information about its restrictions and requirements, please refer to pages 9,18 and 19 of the CMS 2005-2006 FSA booklet and to FAQ's available at http://www.fbmc-benefits.com.

- Click the **Continue** button after selecting your deduction amount.

You will come to a **MCAP Review Page**.



Deduction Frequency:	Bi-Weekly
EZ REIMBURSE Debit Card:	No
Deduction Effective Date:	11/06/2005
Coverage Effective Date:	11/20/2005

Deduction Authorization

I authorize the State of Illinois to deduct from my total compensation for MCAP the amount of $208.33 from each paycheck, totaling $3,124.95 for this plan year (July 1, 2005 through June 30, 2006). This amount is not greater than my estimated eligible expenses for the same period.

Certification Statement

I understand and certify that:

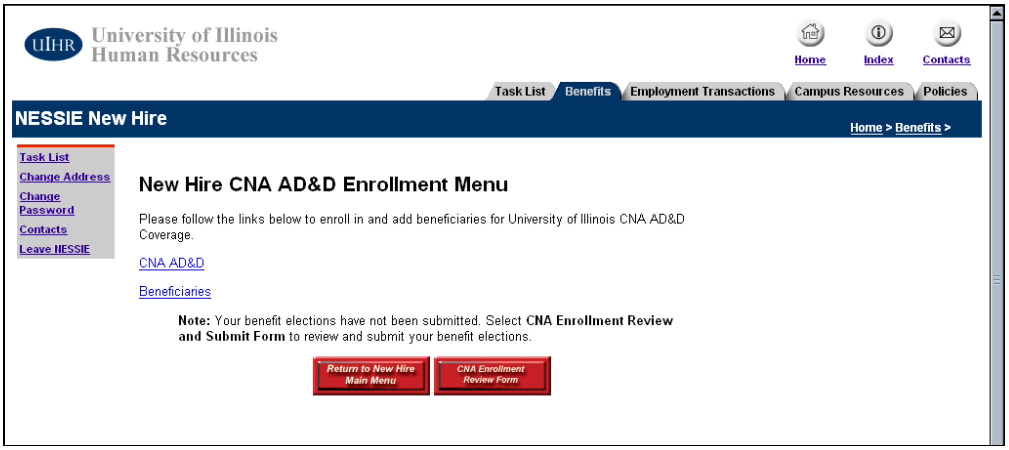
a. I may not change or stop my deposits to this account during the plan year unless I experience an eligible change in status.
b. I will lose any unclaimed amount remaining in my account at the end or the runout period, September 30, 2006.
c. I understand that deductions must continue during any paid leave of absence.
d. I intend to participate in MCAP for the entire plan year. I do not anticipate terminating the state service, retiring, or going on an unpaid leave of absence.
e. I understand that services incurred after my payroll deductions or direct monthly payments (as a result of COBRA) cease, are ineligible for reimbursement.
f. If my payroll deductions cease for any reason, I understand I must complete the necessary paperwork and my participation in the program will terminate on the last day of the pay period for which a deduction was taken, unless I elect to continue my participation through direct payments to the FSA unit.
g. To the best of my knowledge, the information on this form is accurate. I am responsible for any discrepancies that may affect my status with the Internal Revenue Service.

Submit Back

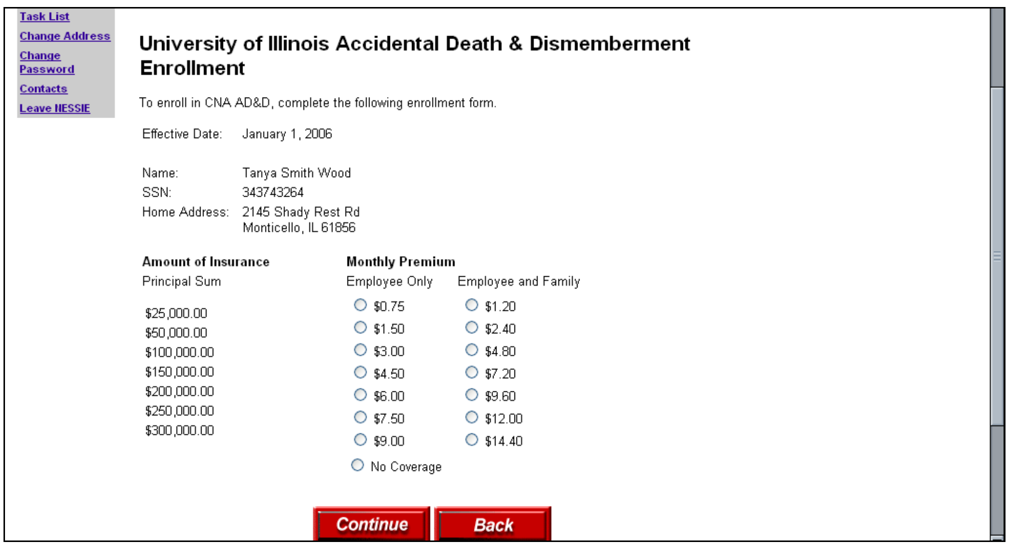
- Verify the **Deduction Authorization**.
- Read the **Certification Statement**.
- Click the **Submit** button to submit the MCAP form.

CNA Accidental Death and Dismemberment (AD&D)

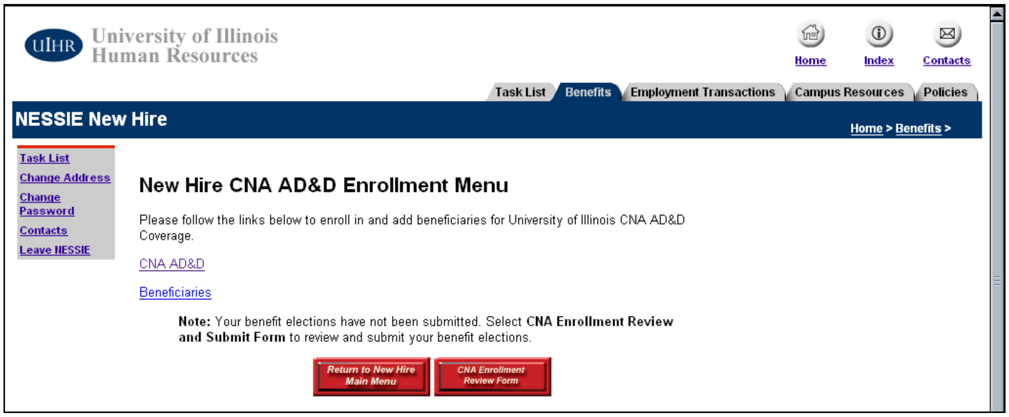
From the page above, click the **CNA Accidental Death and Dismemberment (AD&D)** link.



- Click the **CNA AD&D** link to enroll in the University of Illinois AD&D plan.

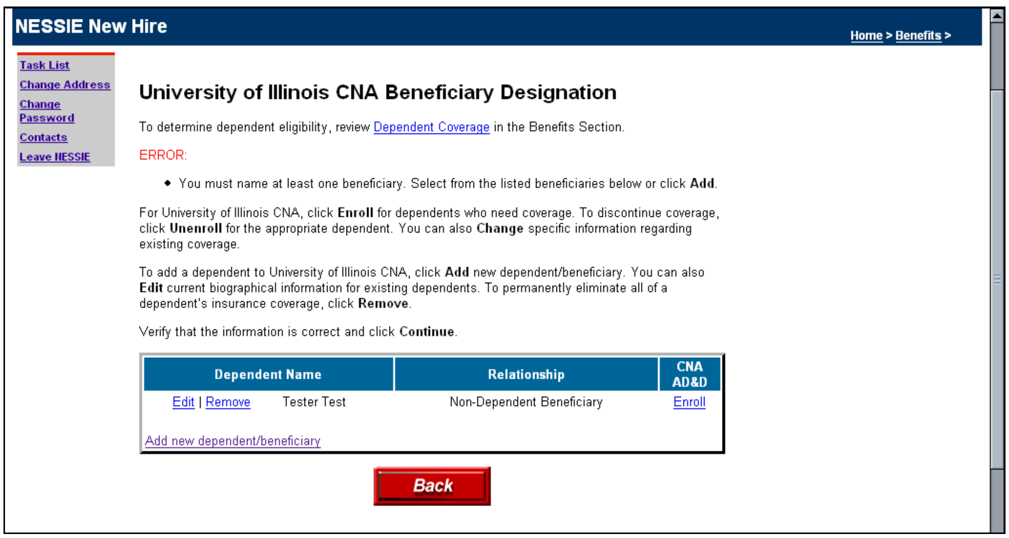


- Select the Amount of Insurance and the Monthly Premium you want by clicking the appropriate radio button.
- Click the **Continue** button.



You will return to the **New Hire CNA AD&D Enrollment Menu**

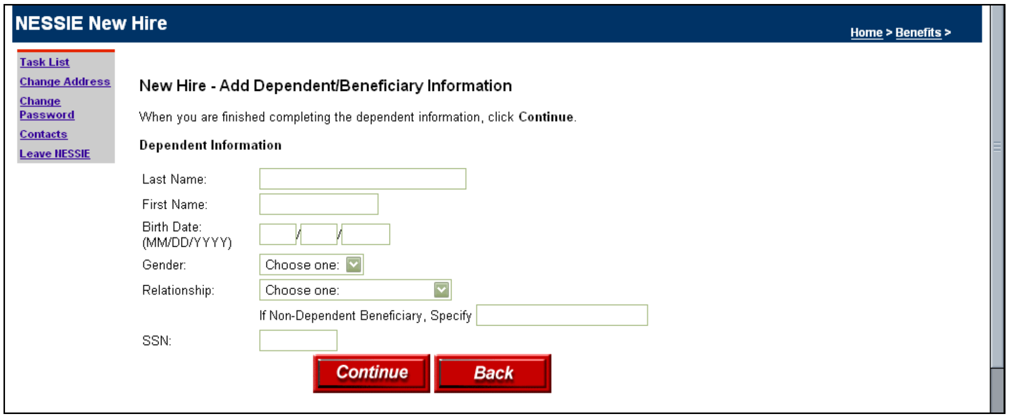
- Click the Beneficiaries link to add beneficiaries for the University of Illinois CNA AD&D Plan.



If you have a dependent, the dependent will show in the Dependent Name field.

- Click the **Edit** link to edit dependent information.
- Click the **Remove** link to remove the dependent.
- Click the **Enroll** link to enroll that dependent in CNA AD&D.
- If you do not have a dependent, click the **Add new dependent/beneficiary** link to add a new dependent/beneficiary.

Add New Dependent/Beneficiary

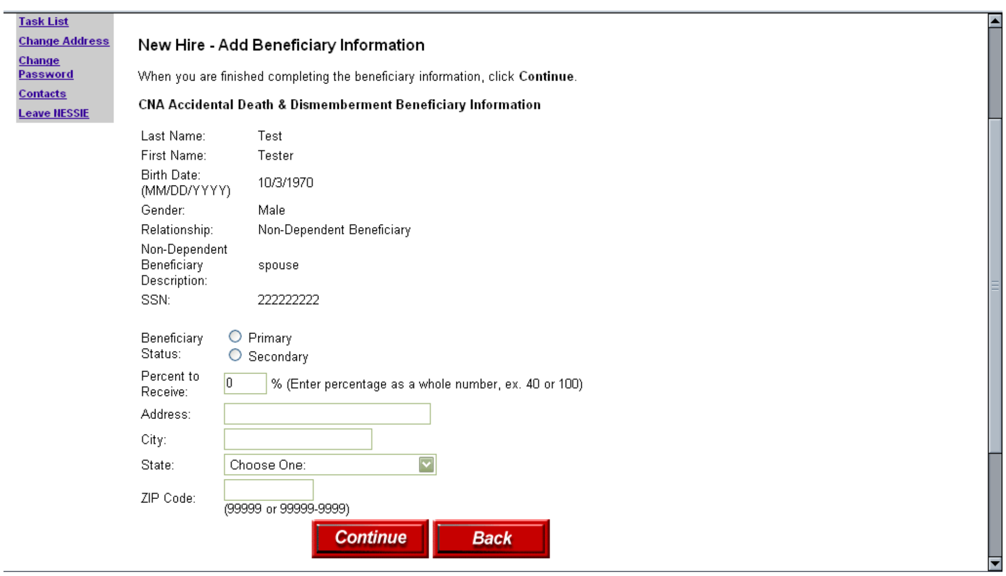


Enter the Dependent/Beneficiary Information:

- Enter the **Last Name**.
- Enter the **First Name**.
- Enter the **Birth Date (MM/DD/YYYY)**.
- Choose the **Gender** from the drop-down list.
- Choose the **Relationship** of the dependent/beneficiary from the drop-down list.
- Enter the **Social Security Number (SSN)**.
- Click the **Continue** button.

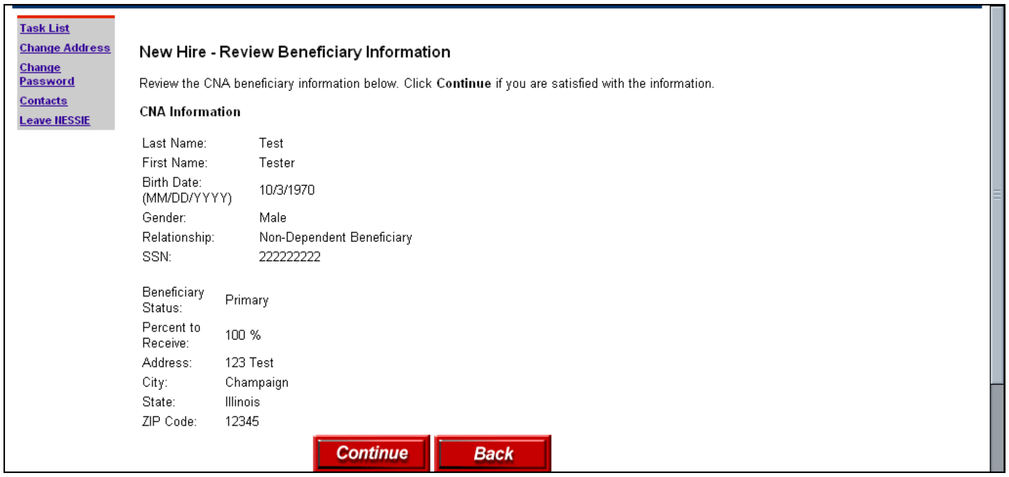
Enroll Dependent

After clicking the Enroll link next to the dependent/beneficiary, you will come to the **New Hire – Add Beneficiary Information** page.



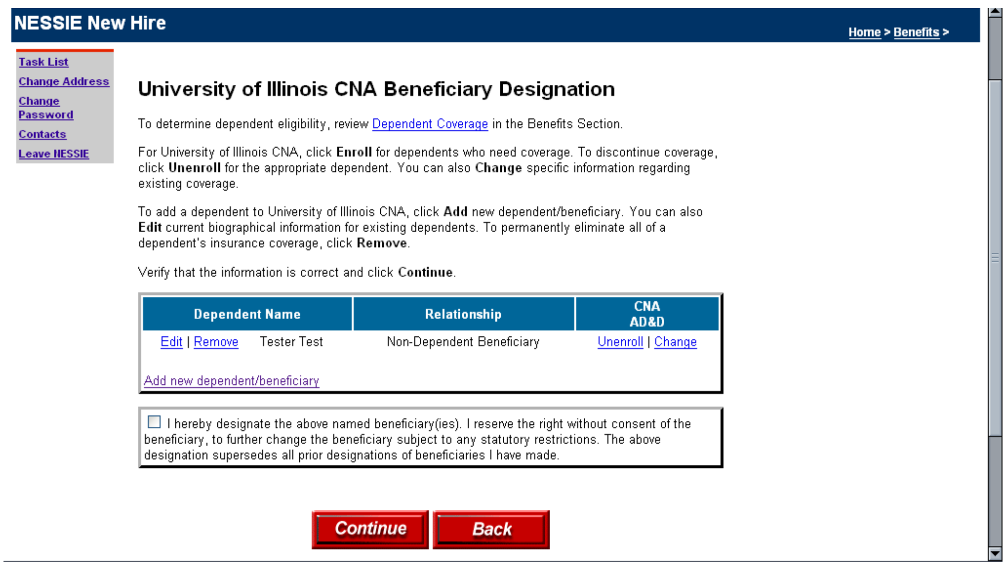
- Select the **Beneficiary Status**: Primary or Secondary.
- Enter the **Percent to Receive** (Enter percentage as a whole number, ex. 40 or 100).

- Enter the **Address**.
- Enter the **City**.
- Choose the **State** from the drop-down list.
- Enter the **Zip Code**.
- Click the **Continue** button.

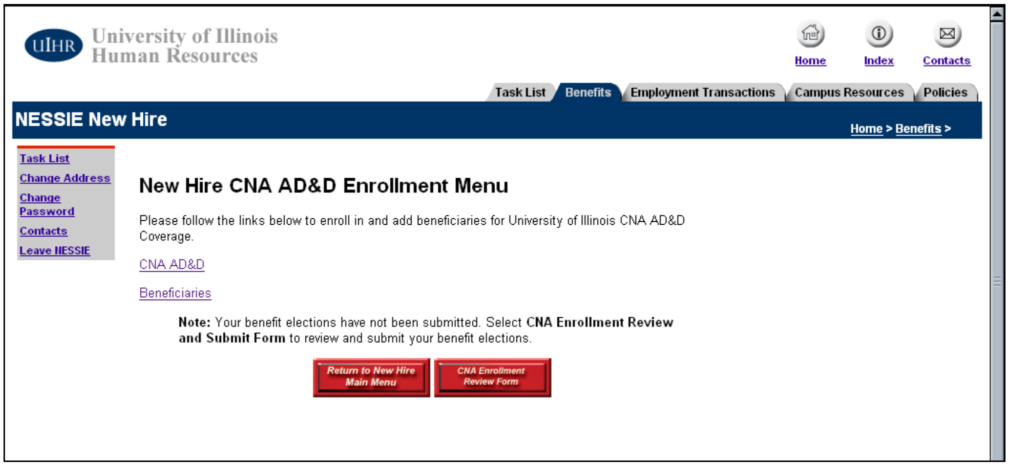


You will then come to a **New Hire – Review Beneficiary Information Review** page.

- Review the beneficiary information.
- Click the **Continue** button.



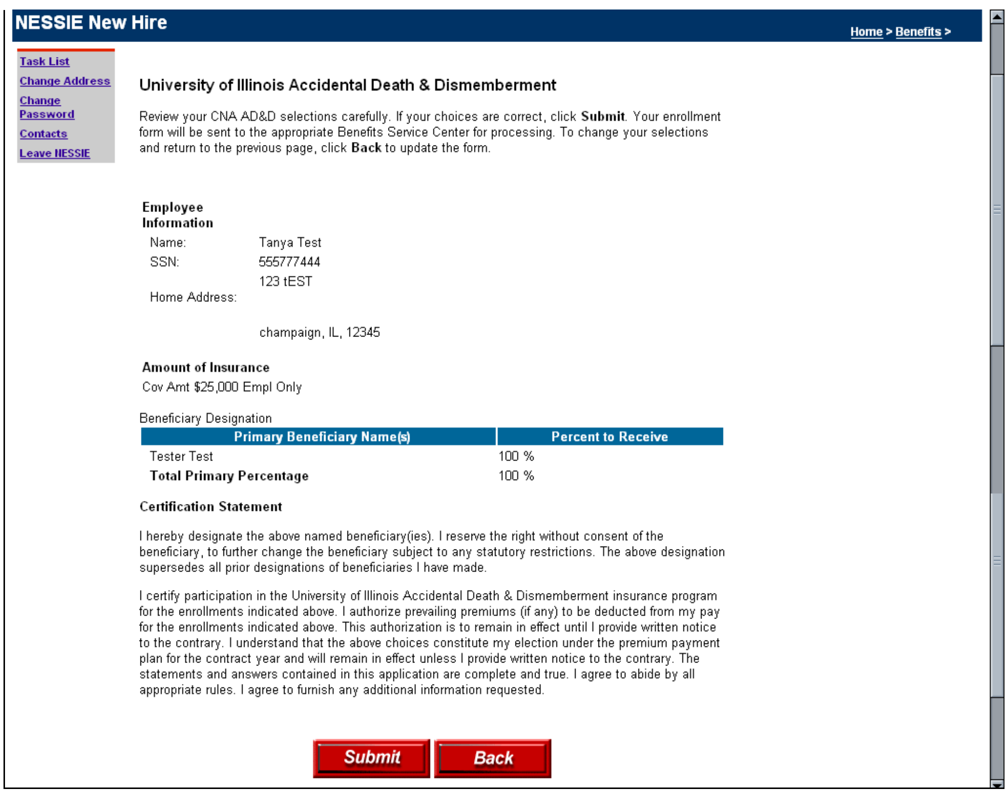
- Click the **Unenroll** link to unenroll your dependent from CNA AD&D coverage.
- Click the **Change** link to change existing coverage.
- Put a check in the designation checkbox to designate the beneficiary.
- Click the **Continue** button.



You will return to the **New Hire CNA AD&D Enrollment Menu**.

WARNING: Your CNA AD&D enrollment has **NOT** been submitted. Select **CNA Enrollment Review Form** to review your enrollment. You will be able to Submit your CNA Enrollment form from the Review Page.

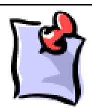
- Click the **CNA Enrollment Review Form** button to review your CNA AD&D form.



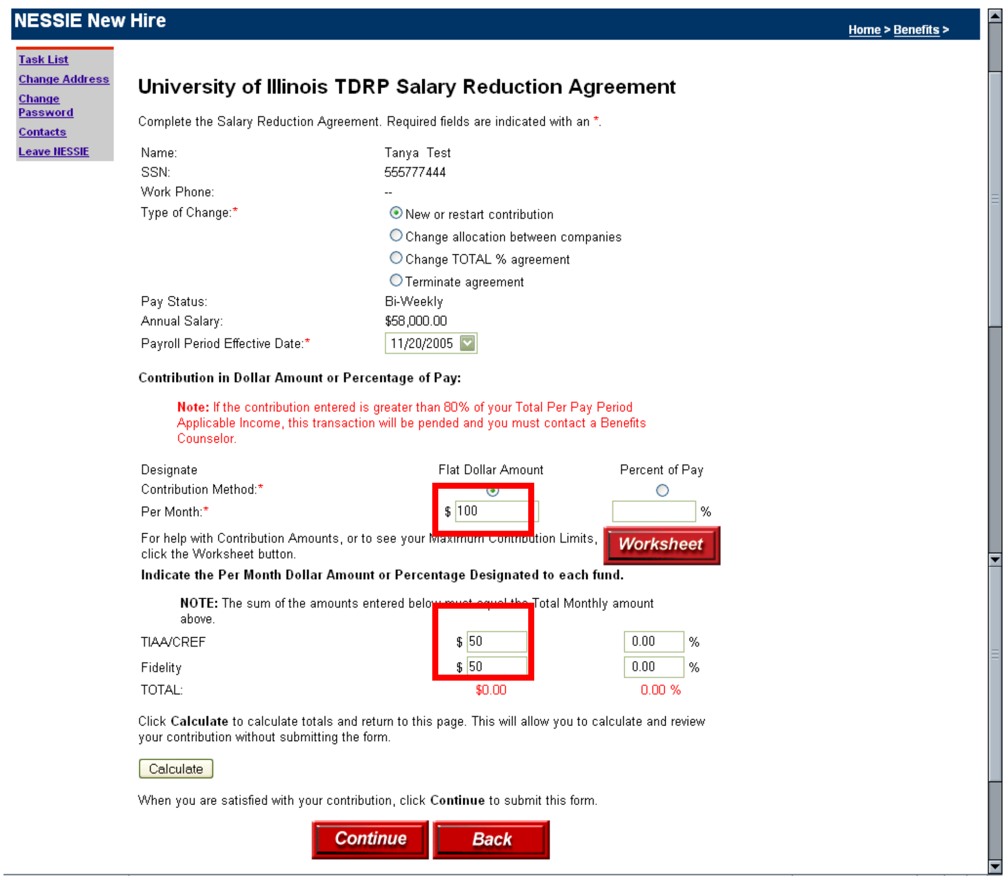
Click the **Submit** button to submit you CNA AD&D Enrollment Form.

Tax Deferred Retirement Plan (TDRP)

Similar to a 401(k) plan, the TDRP is an optional plan that allows you to save pretax dollars for retirement. This section will allow you to complete the **Salary Reduction Agreement Form** to enroll in the TDRP. The Salary Reduction Agreement Form authorizes the University to withhold deposits from your pay and remit the funds to the investment company(s).



NOTE: The enrollment or change process for the TDRP is a two step process. Both steps must be completed to enroll in the plan. You must complete the online Salary Reduction Agreement Form. You must also obtain an investment company enrollment kit and fund prospectus from your campus benefits department or the appropriate investment company listed below. You may choose more than one company as your investment provider and more than one fund within that company. The enrollment kit will contain the necessary forms for initiating an account. Complete the forms and return them to the investment company.



- Select the **Type of Change** you wish to make.
- Select the **Payroll Period Effective Date** from the drop-down list. The Payroll Period Effective Date is the first day of the pay period in which your changes become effective; it is ***NOT*** the first pay date on which you'll see your changes.
- Designate your **Contribution Method**: **Flat Dollar Amount** OR **Percent of Pay**.
- Enter the **Per Month** amount you wish to contribute.

NOTE: For help with Contribution Amounts, or to see your Maximum Contribution Limits, click the **Worksheet** button.

- Indicate the **Per Month Dollar Amount** or **Percentage Designated** to each fund in the **TIAA/CREF** and/or **Fidelity** boxes.

NOTE: The sum of the amounts entered for your investment companies must match the total amount you designated.

See the example in the red boxes on the Salary Reduction Agreement form above.

- Click **Calculate** to calculate totals and return to this page. This will allow you to calculate and review your contribution without submitting the form.
- Click the **Continue** button.

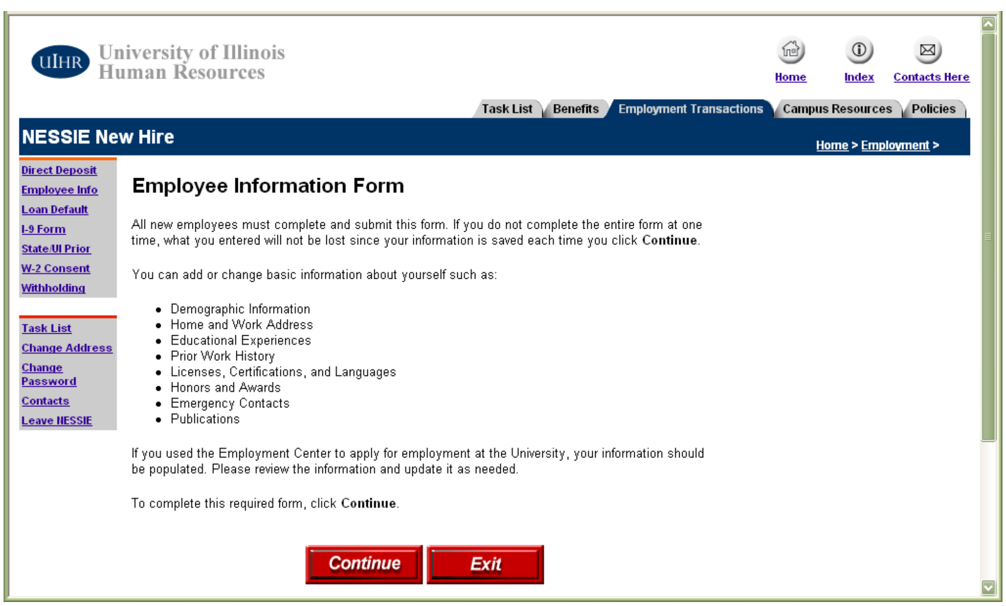
You will come to a review screen where you can view your contributions. Click the **Submit** button from the review screen to submit your **Salary Reduction Agreement** form.

HR Forms

Employee Information Form

All new employees must complete and submit this form.

NOTE: If you do not complete the entire form at one time, what you entered will not be lost since your information is saved each time you click a **Continue** button.



The **Employee Information Form (EIF)** is used to add or change information about yourself, such as:

- Demographic Information
- Home and Work Address
- Educational Experiences
- Prior Work History
- Licenses, Certifications, and Languages
- Honors and Awards
- Emergency Contacts
- Publications

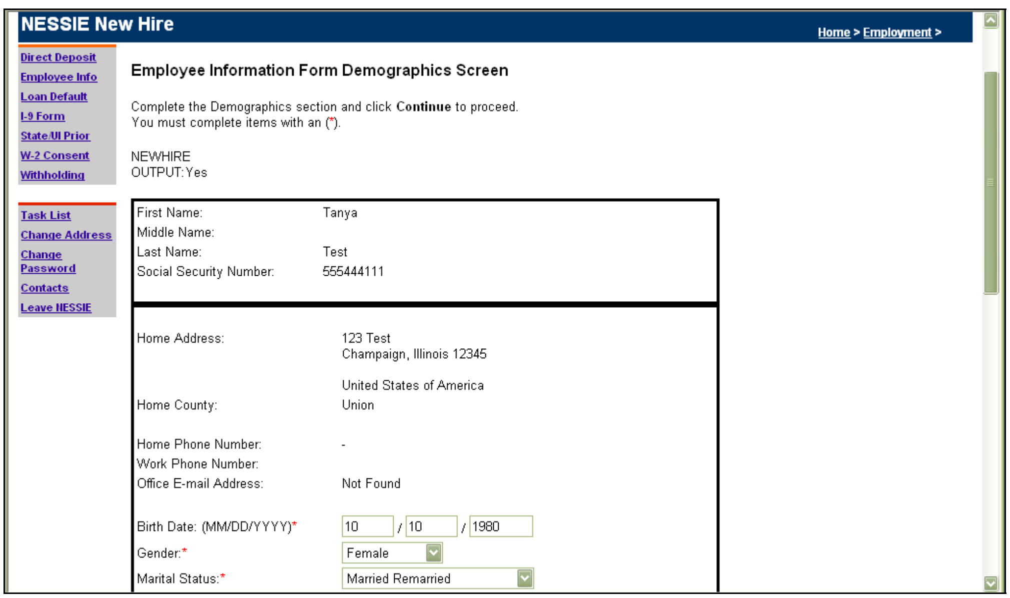
> **NOTE**: If you created an online application through the Employment Center, some of the information on your EIF may already be populated.

Click the **Continue** button to begin completing the EIF.

Demographic Information

Review and complete the information on the **EIF Demographics Screen**.

> **NOTE**: You must complete all fields marked with a red asterisk (*).



NESSIE New Hire

Home > Employment >

Direct Deposit
Employee Info
Loan Default
I-9 Form
State/UI Prior
W-2 Consent
Withholding

Task List
Change Address
Change Password
Contacts
Leave NESSIE

Employee Information Form Demographics Screen

Complete the Demographics section and click **Continue** to proceed.
You must complete items with an (*).

NEWHIRE
OUTPUT:Yes

First Name:	Tanya
Middle Name:	
Last Name:	Test
Social Security Number:	555444111

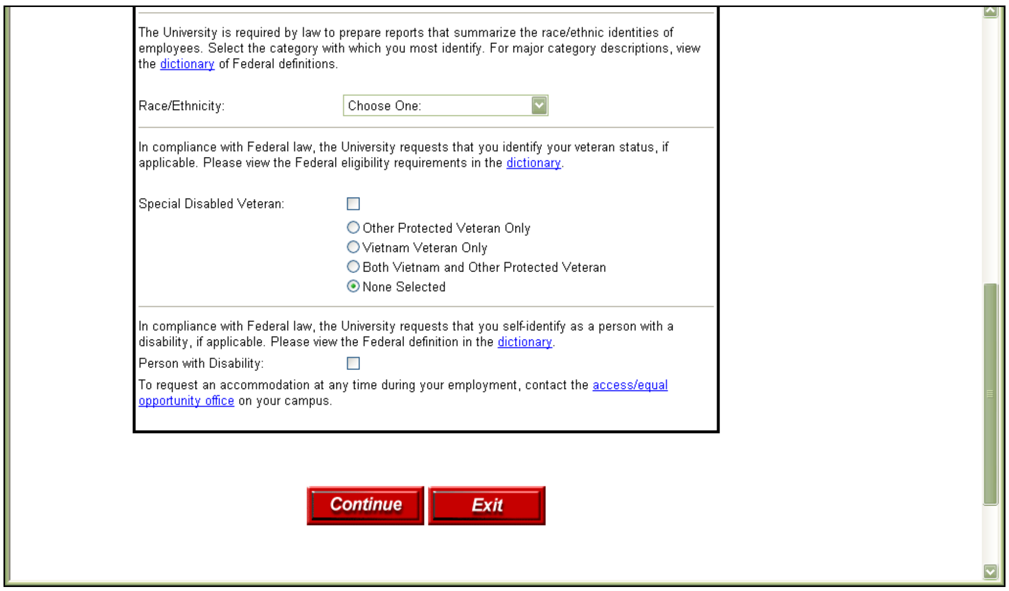
Home Address:	123 Test Champaign, Illinois 12345 United States of America
Home County:	Union
Home Phone Number:	-
Work Phone Number:	
Office E-mail Address:	Not Found
Birth Date: (MM/DD/YYYY)*	10 / 10 / 1980
Gender:*	Female
Marital Status:*	Married Remarried

<u>Demographic Information</u>

Confirm the following information - this information should already be populated:

- First Name
- Last Name

- SSN
- Home Address
- Home County
- Home Phone Number
- Work Phone Number
- Office E-mail Address
- Gender
- Marital Status



Race/Ethnicity Information

- Select your **Race/Ethnicity** from the **Race/Ethnicity** drop-down box.

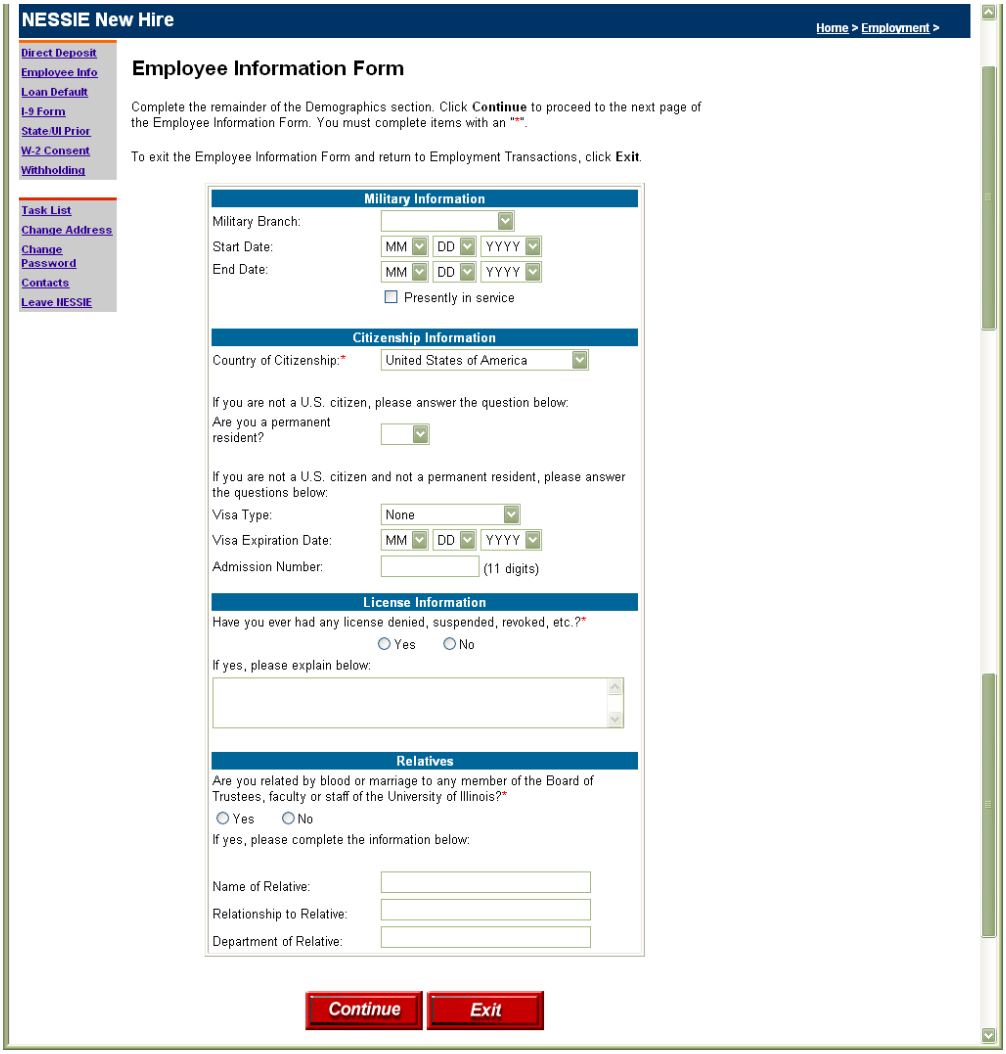
Veteran Status Information

- Select the **Special Disabled Veteran** checkbox if you are a Special Disabled Veteran.
- Select the appropriate radio button if you are:
    - Other Protected Veteran Only
    - Vietnam Veteran Only
    - Both Vietnam and Other Protected Veteran
- Select the **None Selected** radio button if you are not a veteran.

Disability Status

- Select the **Person with Disability** checkbox if you have a disability.

Once you complete the information on the Demographics screen, click the **Continue** button.



Military Information

- Select the **Military Branch** you were or are enlisted in.
- Enter the date you enlisted in the military in the **Start Date** field. You MUST enter the date in MM/DD/YYYY format.
- Enter the date you were discharged from the military in the **End Date** field. If you are still enlisted, leave this field blank. You MUST enter the date in MM/DD/YYYY format.
- Select the **Presently in service** checkbox if you are still enlisted in the military.

Citizenship Information

- Select your **Country of Citizenship**.
- If you are not a U.S. citizen, indicate whether or not you are a permanent resident.
- If you are not a U.S. citizen or permanent resident, indicate the following:
  - Visa Type

- Visa Expiration Date
- Admission Number. This number is an 11 digit number.

License Information

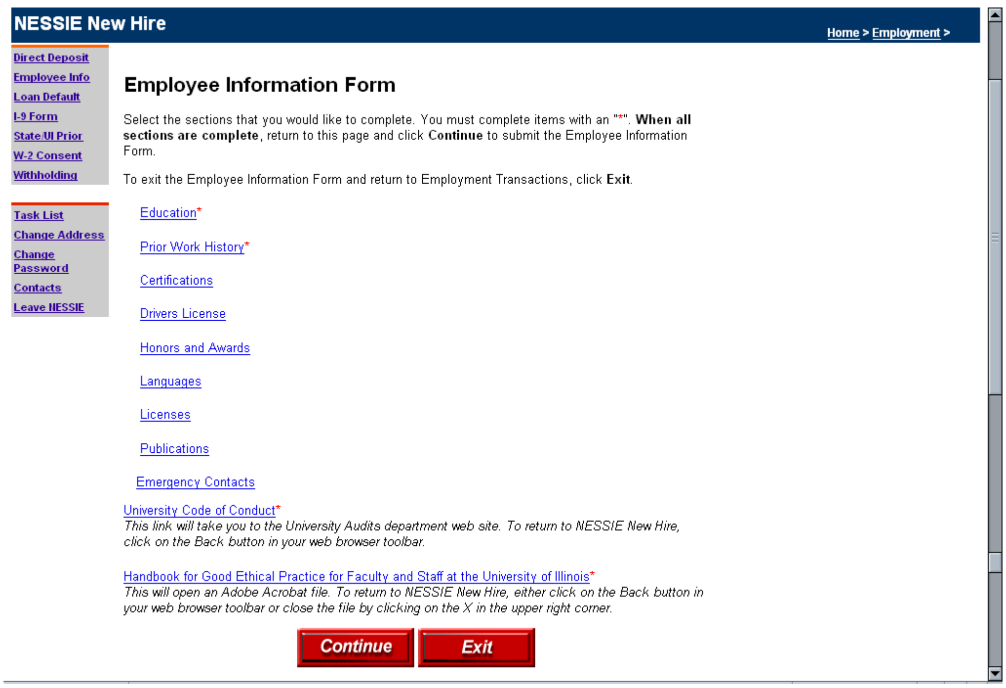
- Select **Yes** or **No** to indicate if you have ever had a **license denied, suspended, or revoked**. If you select **Yes**, please explain in the comments field below the question.

Relatives Information

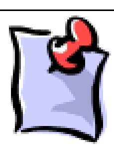
- If you have a relative employed by the University of Illinois or on the Board of Trustees, enter their name(s) in the **Name of Relative** field.
- Enter your relationship to the individual(s) named in the **Relationship to Relative** field.
- Enter the unit where your relative(s) works in the **Department of Relative** field.

Once you complete the information on this page, click the **Continue** button.

You will come to the **Employee Information Form Main Menu**.



The Employee Information Form Main Menu lists the sections included for this form.



NOTE: The required sections are marked with a red asterisk (*).

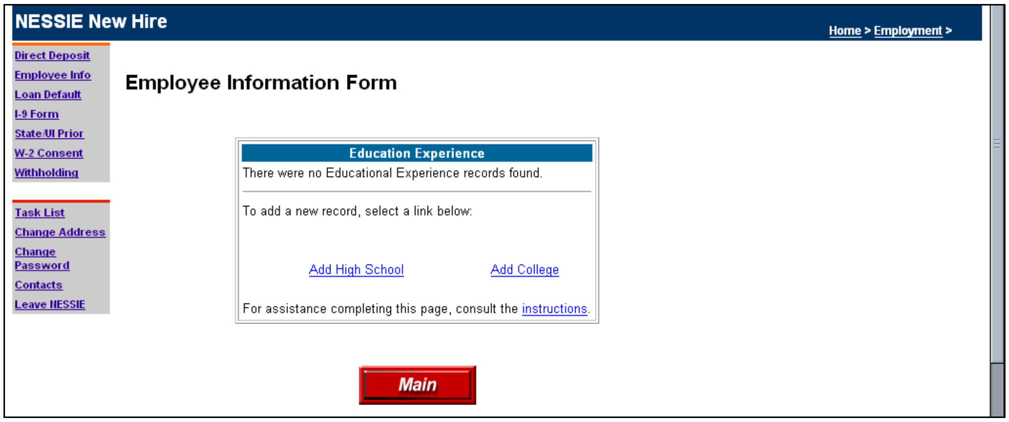
Other sections are not required for completion of the EIF, however, they may be required by your department for employment. For example, you may be required to have a certain License or Certification for your job. In that case, you would want to complete the License or Certification section.

- Click a section link to add, update, or delete information in that section.
- Click the **Continue** button to go to the end of the EIF.

- Click the **Exit** button to exit the EIF.

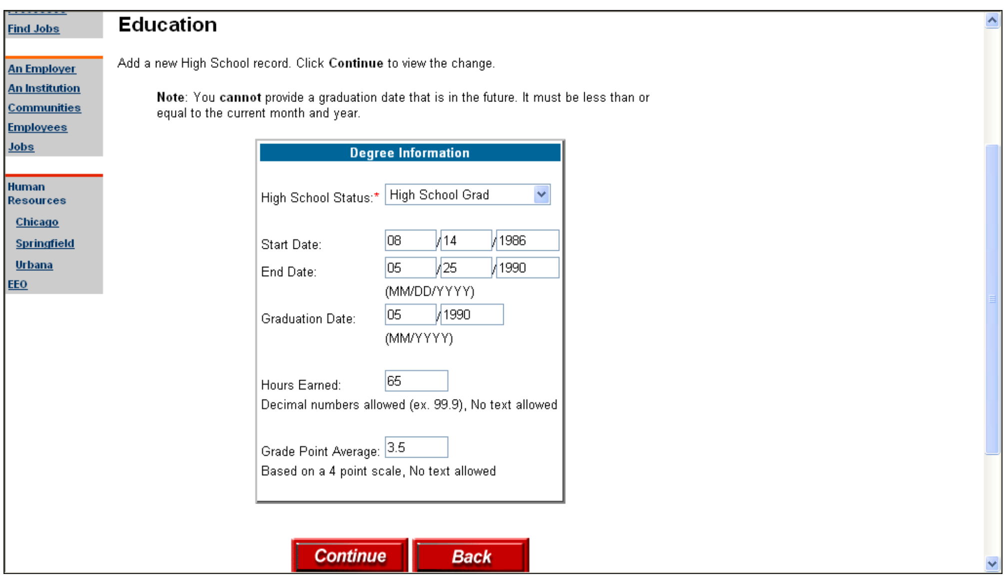
Education

Click the **Education** link on the EIF Main Menu to complete your education experience.



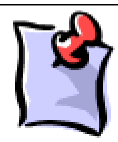
- Click the **Add High School** link to add your high school records.
- Click the **Add College** link to add your college or trade school records.
- Click the **Main** button to return to the Employment Application Main Menu.

High School Information

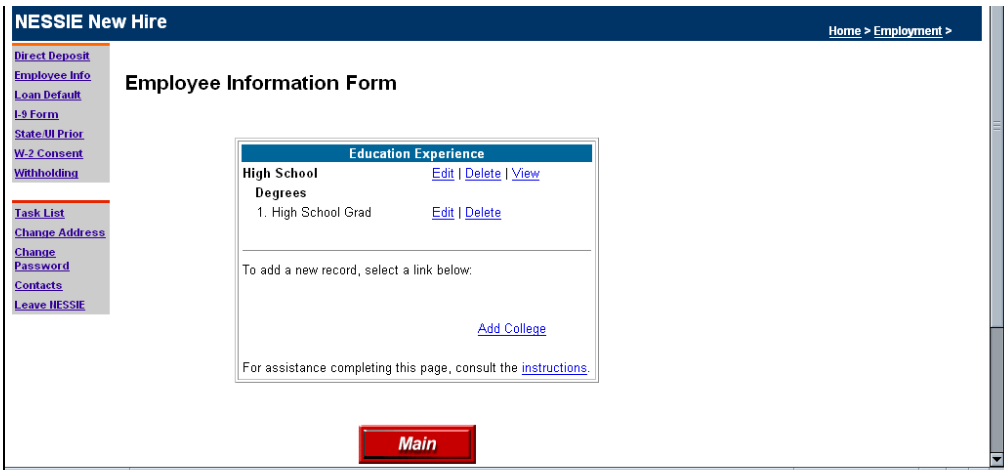


- Select your **High School Status** from the list: *None*, *High School Equivalency*, *High School Grad*, or *Non High School Grad*.
- Enter the **Start Date** and **End Date** of your time in high school. You MUST enter the dates in MM/DD/YYYY format.
- If you graduated, enter your **Graduation Date**. You MUST enter the date in MM/YYYY format.

- Enter the number of credit **Hours Earned**. Only numbers are allowed in this field.
- Enter your **Grade Point Average** as of your end date of high school. Only numbers are allowed in this field.
- Click the **Continue** button.



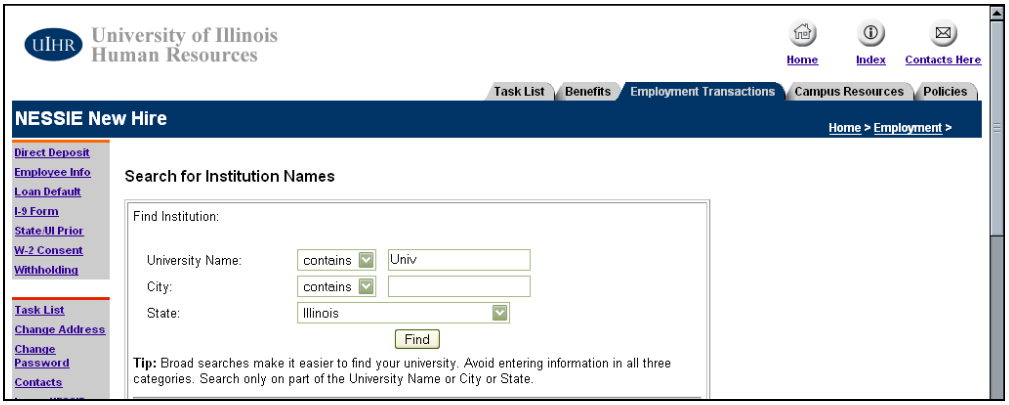
NOTE: You can only enter one high school record. If you attended more than one high school, enter this information as an accumulation of your total high school experience.



You return to the Education Experience page. Your high school information now appears.

- Click the **Edit** link to update the information entered. You edit information on the same page in which you added the record.
- Click the **Delete** link to permanently remove the entire record. To reinstate the record, you must click the **Add High School** link and re-enter the information.
- Click the **View** link to view the information entered.
- Click the **Add College** link to add your college or trade school records.
- Click the **Main** button to return to the EIF Main Menu.

College Information

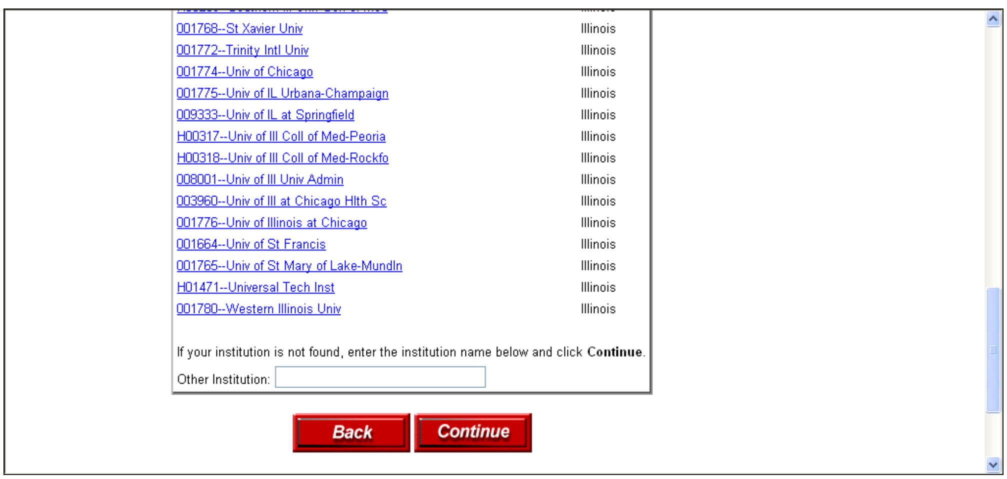


Enter the search criteria for your college and click the **Find** button.

NOTE: Institution names are stored in Banner where they are abbreviated to save space. Because of this, it is best to do broad searches to find your institution.

For example, to find the University of Illinois, enter **Univ** in the name field and select Illinois for the **State**.

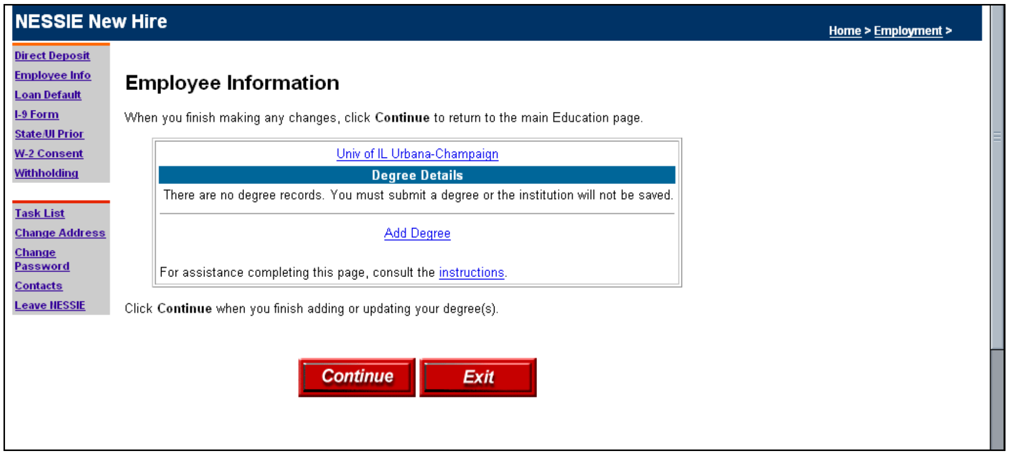
However, not all institutions in Banner have a State associated with them. The institution might be in the system, but won't be retrieved if you include a State in your search. Broaden your search criteria if you do not see the search results you are expecting.



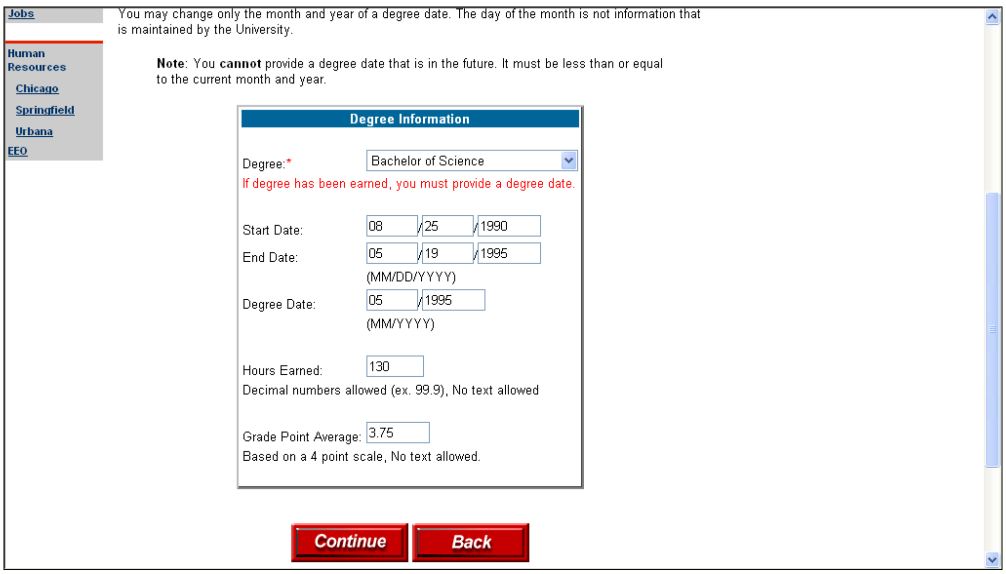
A list of Institution names matching your search displays. Click the name of the institution to continue.

NOTE: If the search does not return your institution, enter the name in the **Other Institution** field and click the **Continue** button.

You also can email the HR Office and they can add the institution name to the list. If you are on a time constraint, enter your institution using the **Other Institution** option, then update your record with the correct institution once the HR Office adds the name.



Once you have your institution selected, click the **Add Degree** link to add your degree details.



TIP: While it is not required to do so, you should enter the highest degree you have received, as well as any additional degrees. If your new job requires a medical degree, for example, you will not be able to receive a paycheck until you have entered that degree.

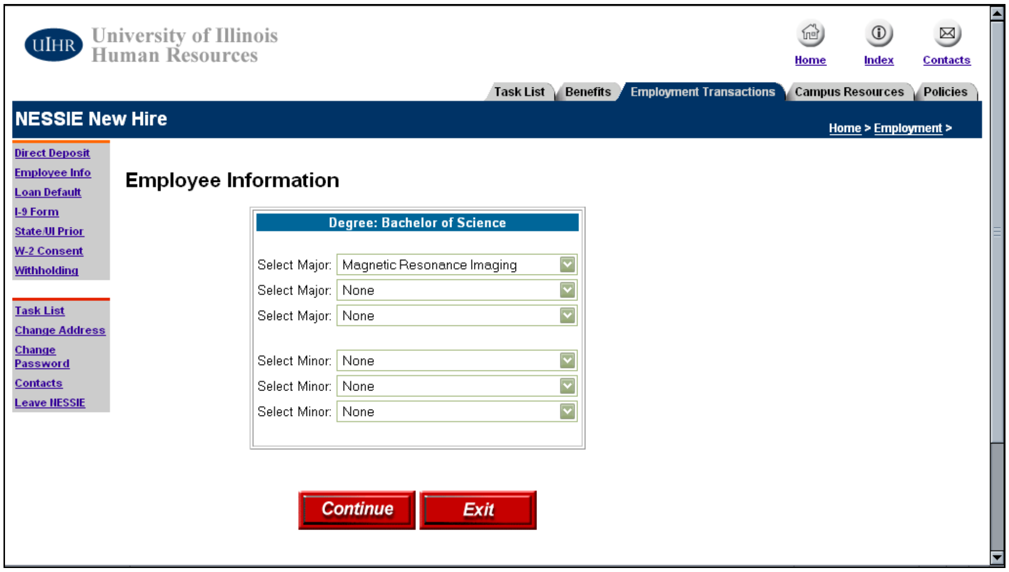
Warning: Once you submit your EIF in NESSIE New Hire you will not be able to access it again to enter any information you did not add.

You will have to use regular NESSIE to enter any additional information.

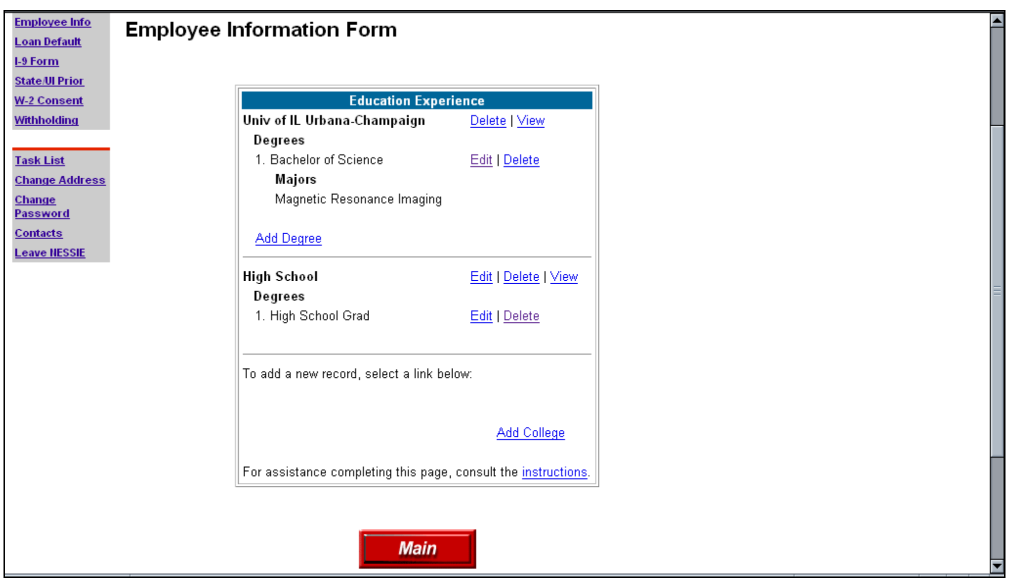
NOTE: You must complete all fields marked with a red asterisk (*).

- Select the **Degree** earned from the list. If you attended this institution but did not earn a degree, select *None* from the list.

- Enter the **Start Date** and **End Date** you attended this institution. You MUST enter the dates in MM/DD/YYYY format.
- If you earned a degree from this institution, enter the **Degree Date** on which you received your degree. You MUST enter the date in MM/YYYY format.
- Enter the number of credit **Hours Earned**. Only numbers are allowed in this field.
- Enter your **Grade Point Average** as of your end date at this institution. Only numbers are allowed in this field.
- Click the **Continue** button.



- Select a **Major** and **Minor** (if applicable) for your degree from the list. You can select more than one major or minor.
- Click the **Continue** button.



You return to the Education Experience page. Your college information now appears.

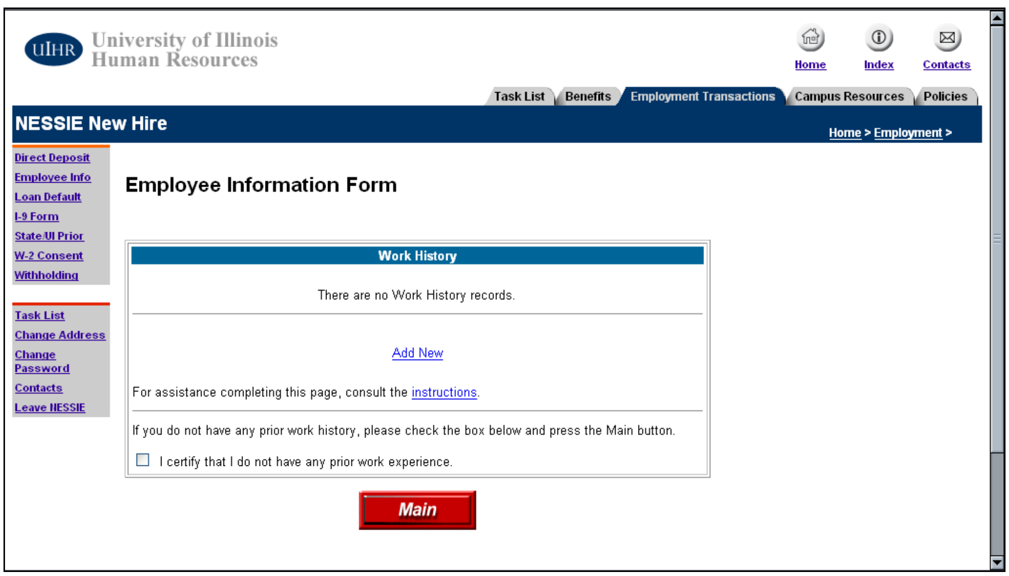
- Click the **Edit** link to update the information entered. You edit information on the same page in which you added the record.
- If you have additional degrees to enter, click the **Add Degree** link and repeat the above steps.
- Click the **Delete** link to permanently remove the entire record. To reinstate the record, you must click the **Add College** or **Add Degree** link and re-enter the information.

> **NOTE**: Deleting a degree from an Institution with only one degree also deletes the entire Institution.
> Deleting an Institution deletes all degrees associated with that institution.

- Click the **View** link to view the information entered.
- Click the **Add Degree** link to add another degree to your current institution record.
- Click the **Add College** link to add another institution name to your record.
- Click the **Main** button to return to the EIF Main Menu.

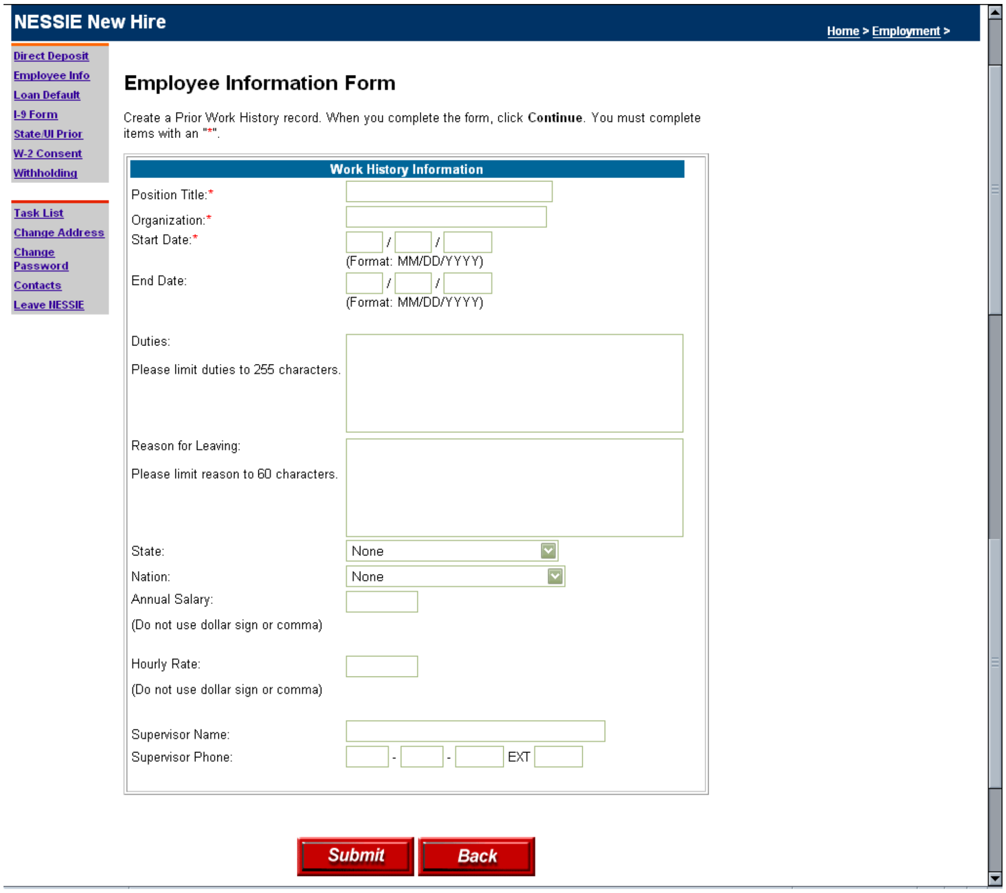
Prior Work History

Click the **Prior Work History** link on the EIF Main Menu to enter your employment experience.



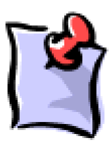
- Click the **Add New** link to add a new work experience record.
- Select the checkbox if you want to **certify that you have no prior work experience**.
- Click the **Main** button to return to the EIF Main Menu.

> **NOTE**: When adding Work Experience records, start with your most recent or current job.



WARNING: Use caution if you are cutting and pasting information from a resume into this form. Special characters such as bullets, foreign language accents, and other formatting used in a resume can cause errors in the application system.

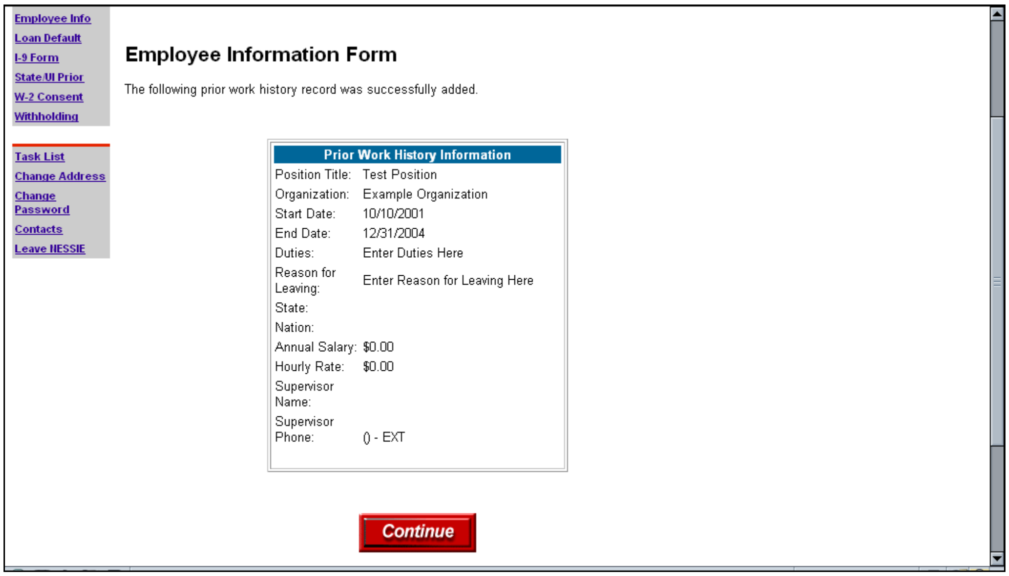
Remove any special characters before pasting text into this form.



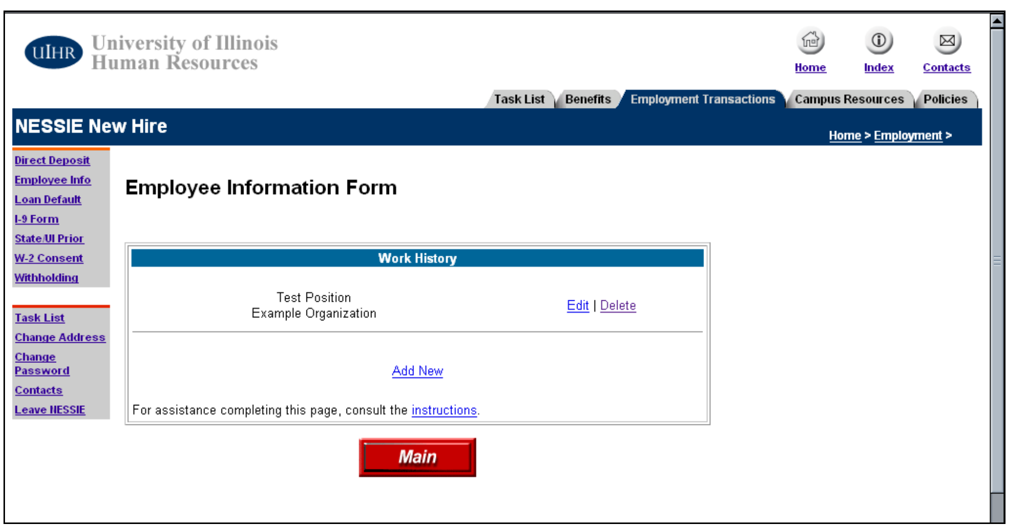
NOTE: You must complete all fields marked with a red asterisk (*).

- Enter the **Position Title** you held at this job.
- Enter the name of the **Organization** of your employer at this job.
- Enter the date you began work at this job in the **Start Date** field. You MUST enter the date in MM/DD/YYYY format.
- Enter the date you left this job, if applicable, in the **End Date** field. You MUST enter the date in MM/DD/YYYY format.
- Enter an explanation of your job **Duties.**
- Enter an explanation of your **Reason for Leaving** this job.
- Enter the name of the **City** where you held this job.

- Select the **State** and **Nation** where you held this job.
- Enter your **Annual Salary** and/or **Hourly Rate** at this job. Only numbers are allowed in these fields.
- Enter your **Supervisor's Name** at this job.
- Enter your **Supervisor's Phone** number at this job.
- Click the **Submit** button.



Review the new Work Experience record added and click the **Continue** button.



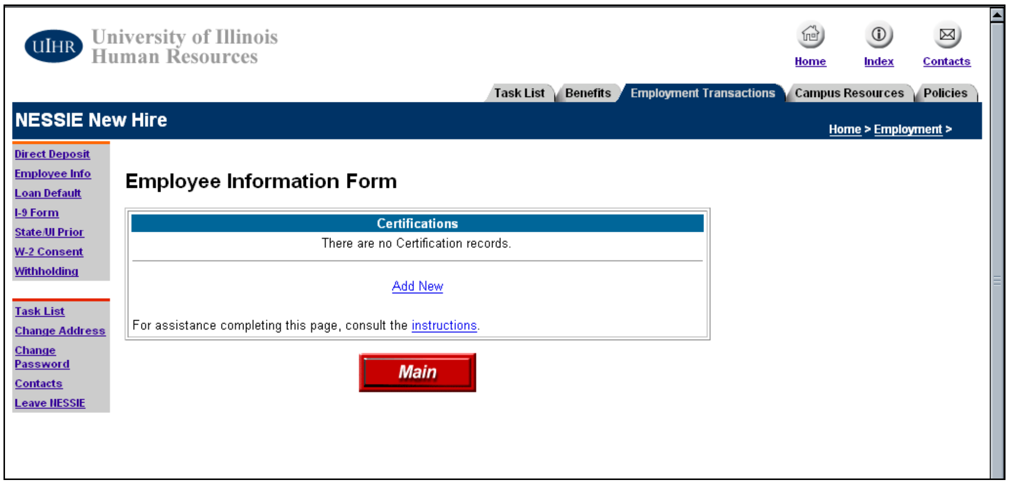
You return to the Work Experience page. Your work history now appears.

- Click the **Edit** link to update the information entered. You edit information on the same page in which you added the record.
- Click the **Delete** link to permanently remove the entire record. To reinstate the record, you must click the **Add** link and re-enter the information.

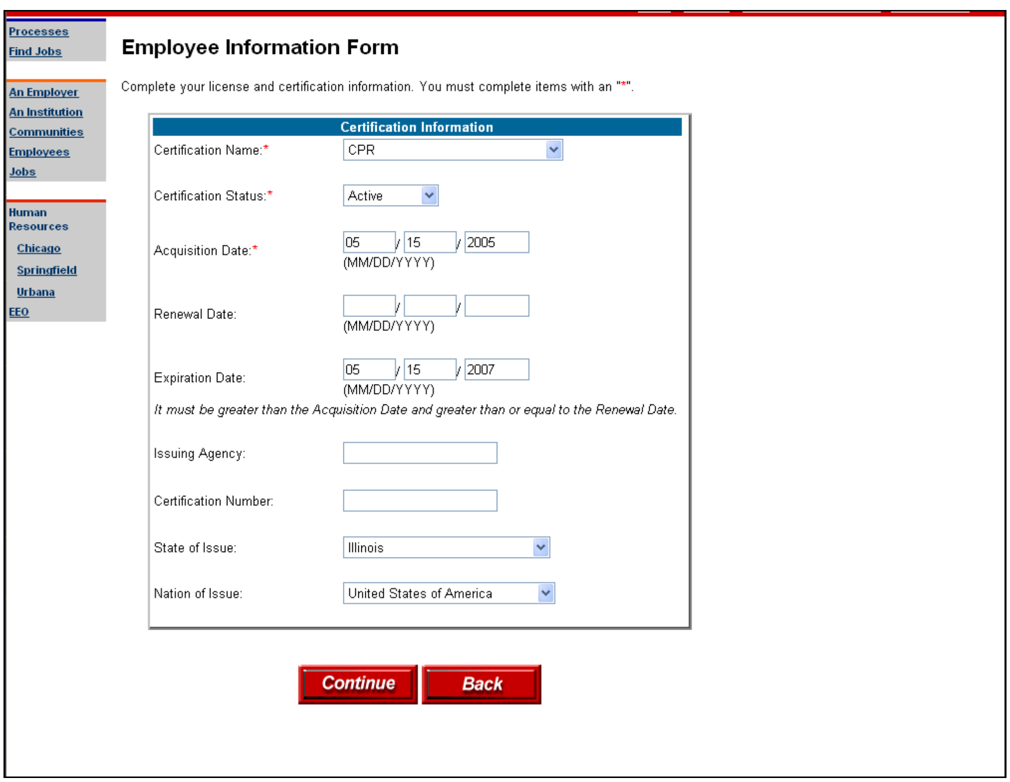
- Click the **Add New** link to add another work experience record to your EIF.
- Click the **Main** button to return to the EIF Main Menu.

Certifications

Click the **Certifications** link on the EIF Main Menu to add any licenses or certifications you have earned.



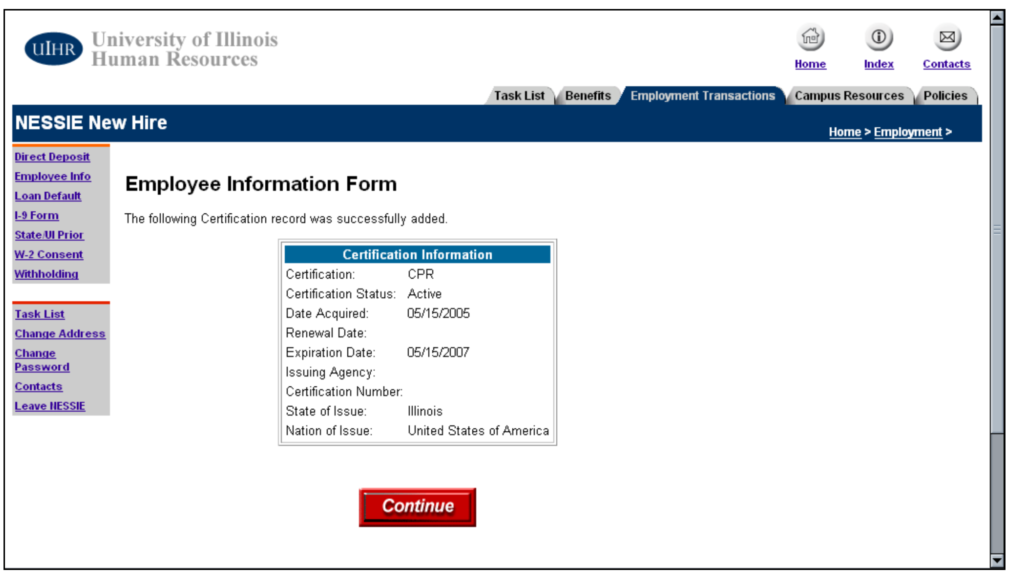
- Click the **Add New** link to add a certification.
- Click the **Main** button to return to the EIF Main Menu.



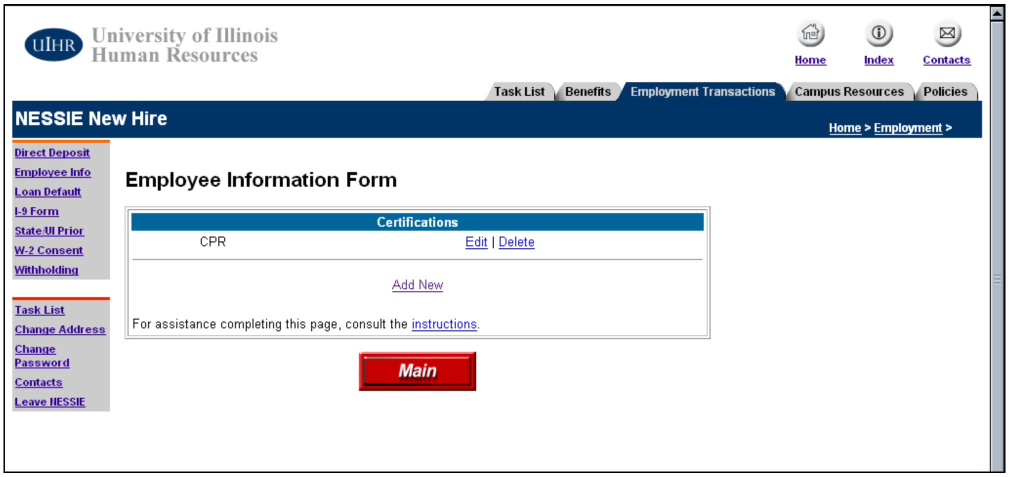
NOTE: You must complete all fields marked with a red asterisk (*).

NOTE: If the certification you want to add is not listed, email the HR Help Desk and they can add the certification name to the list.

- Select the **Certification Name** from the list.
- Select the status of your certification from the **Certification Status** list: *Active*, *Life-long*, *Revoked*, or *Suspended*.
- Enter the date you gained the certification in the **Acquisition Date** field. You MUST enter the date in MM/DD/YYYY format.
- Enter the date you are due to renew your certification in the **Renewal Date** field. You MUST enter the date in MM/DD/YYYY format.
- Enter the date your certification expires in the **Expiration Date** field. You MUST enter the date in MM/DD/YYYY format.
- Enter the name of the **Issuing Agency** of the license or certification.
- Enter the **Certification Number** on your license or certificate.
- Select the **State of Issue** and **Nation of Issue** of the certification from the lists.
- Click the **Continue** button.



Review the new Certification record added and click the **Continue** button.

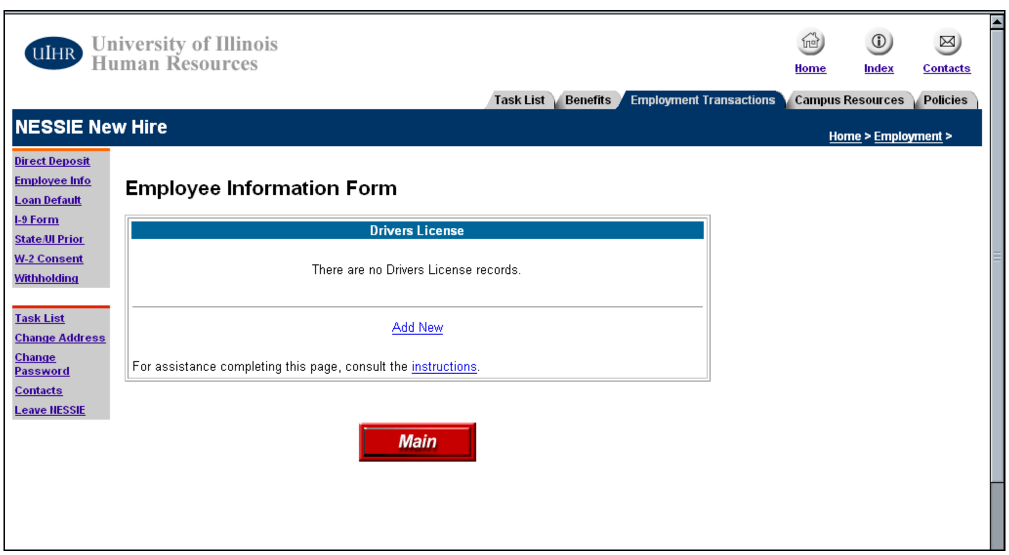


You return to the Certification Information page. Your certificate information now appears.

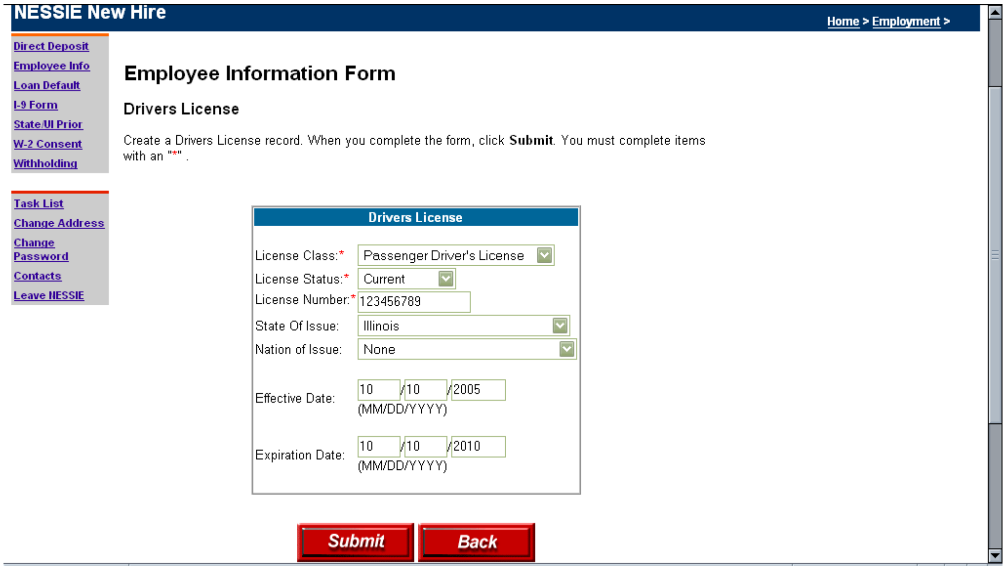
- Click the **Edit** link to update the information entered. You edit information on the same page in which you added the record.
- Click the **Delete** link to permanently remove the entire record. To reinstate the record, you must click the **Add** link and re-enter the information.
- Click the **Add New** link to add another certification record to your application.
- Click the **Main** button to return to the EIF Main Menu.

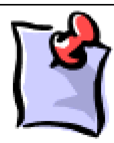
Drivers License

Click the **Drivers License** link on the EIF Main Menu to add your driver's license information to your EIF.



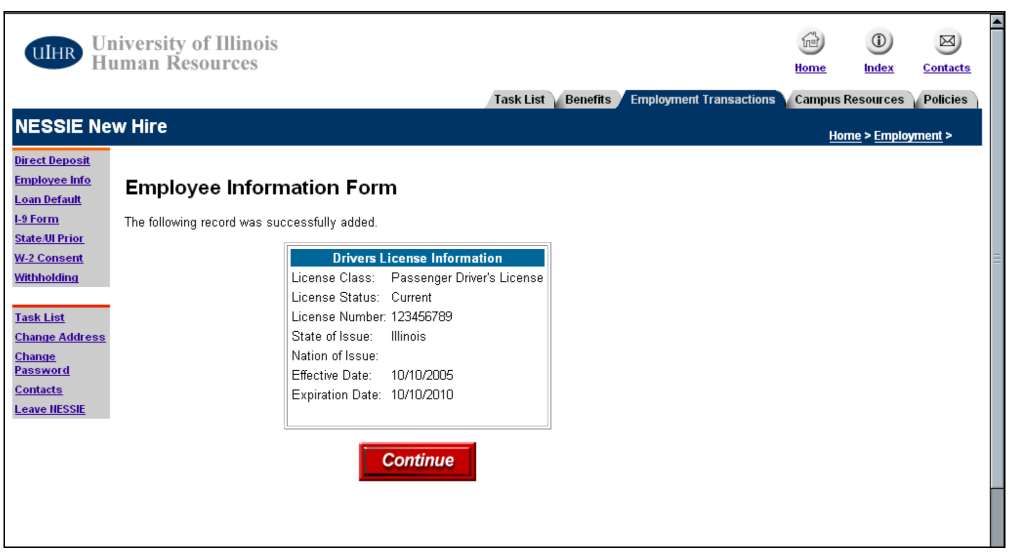
- Click the **Add New** link to add your driver's license record.
- Click the **Main** button to return to the EIF Main Menu.



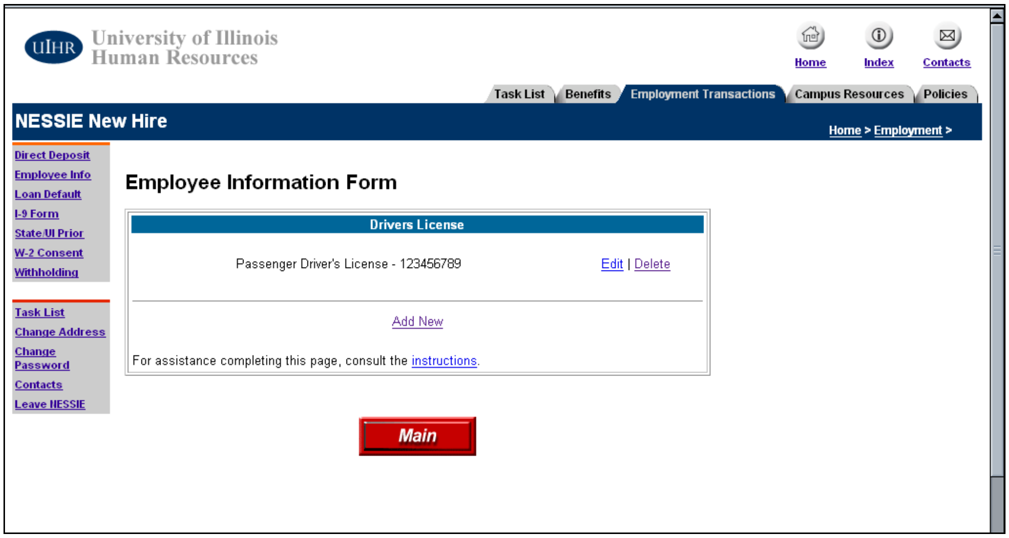


NOTE: You must complete all fields marked with a red asterisk (*).

- Select the type of license you have from the **License Class** list: *Commercial* or *Passenger*.
- Select the **License Status** of your license: *Current*, *Expired*, *In Process*, or *Suspended*.
- Enter your **License Number**.
- Select the **State of Issue** and **Nation of Issue** from the list.
- Enter the **Effective Date** of the license. You MUST enter the date in MM/DD/YYYY format.
- Enter the **Expiration Date** of the license. You MUST enter the date in MM/DD/YYYY format.
- Click the **Submit** button.



Review the new Drivers License record added and click the **Continue** button.

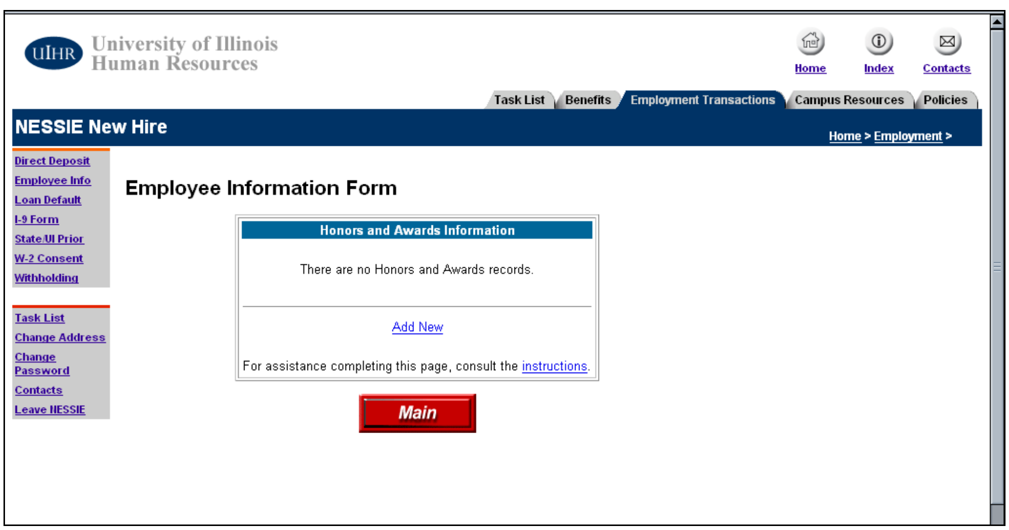


You return to the Drivers License Information page. Your driver's license record now displays.

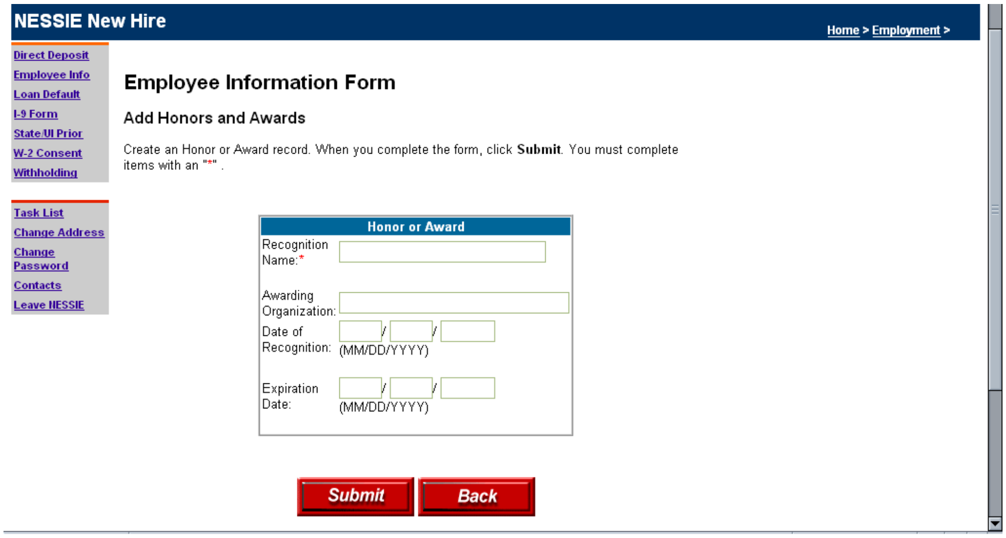
- Click the **Edit** link to update the information entered. You edit information on the same page in which you added the record.
- Click the **Delete** link to permanently remove the entire record. To reinstate the record, you must click the Add link and re-enter the information.
- Click the **Add New** link to add another driver's license record to your application.
- Click the **Main** button to return to the EIF Main Menu.

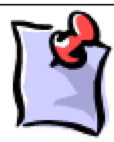
Honors and Awards

Click the **Honors and Awards** link on the EIF Main Menu to enter any honors or awards earned to your EIF.



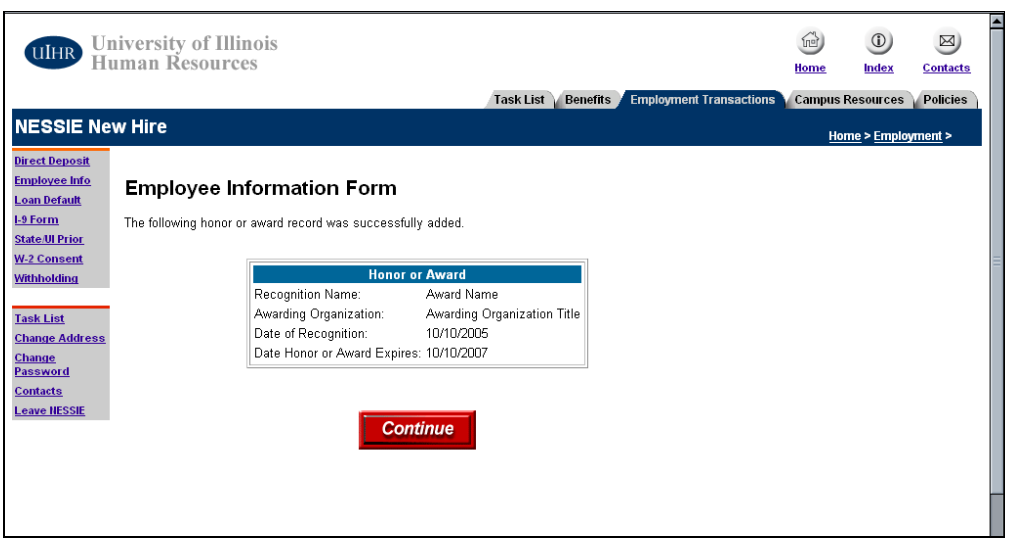
- Click the **Add New** link to add your honor or award record.
- Click the **Main** button to return to the EIF Main Menu.



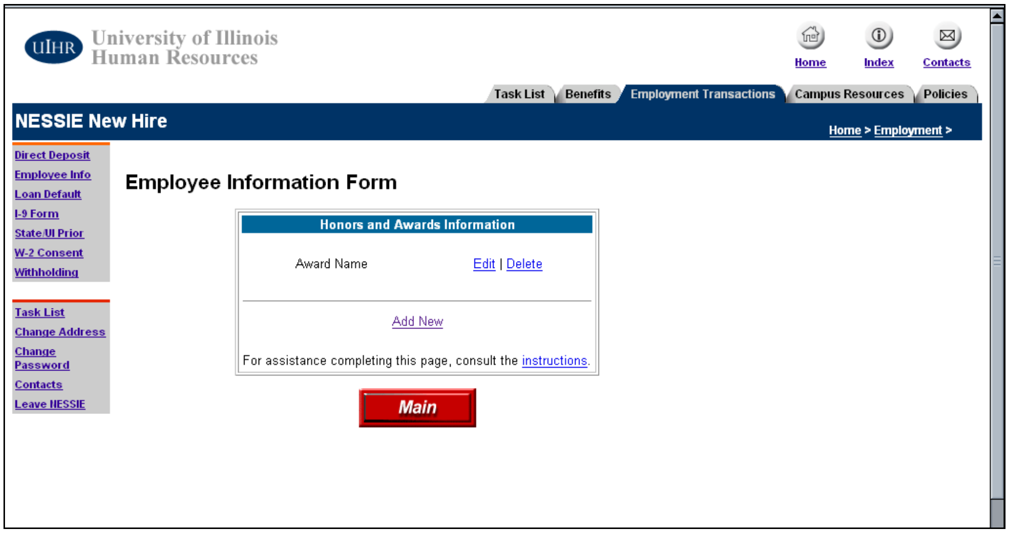


NOTE: You must complete all fields marked with a red asterisk (*).

- Enter the name of the honor or award received in the **Recognition Name** field.
- Enter the name of the **Awarding Organization** that gave you the honor or award.
- Enter the date you received the honor or award in the **Date of Recognition** field. You MUST enter the date in MM/DD/YYYY format.
- Enter the date the honor or award expires, if applicable, in the **Expiration Date** field. You MUST enter the date in MM/DD/YYYY format.
- Click the **Continue** button.



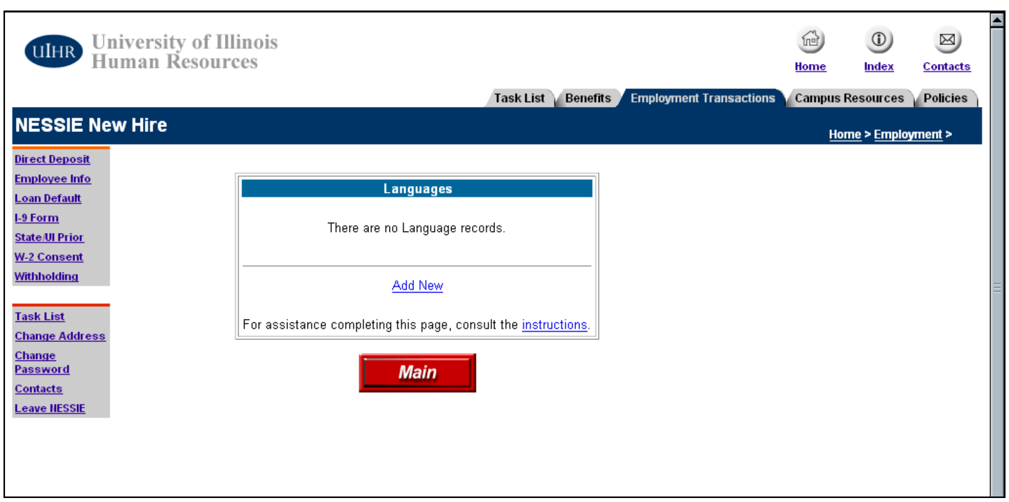
Review the new Honor or Award record added and click the **Continue** button.



You return to the Honors and Awards page. Your honor or award record now displays.

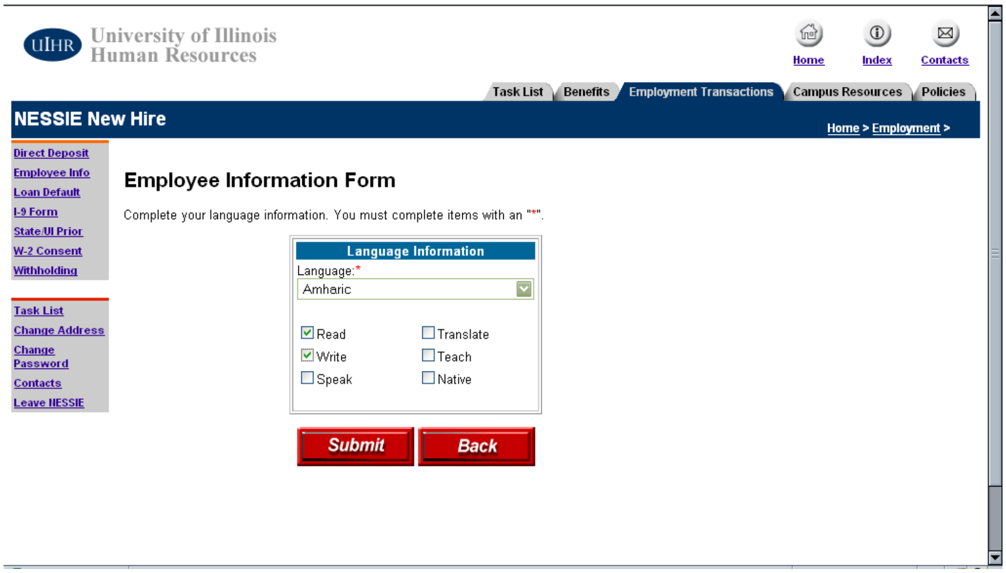
- Click the **Edit** link to update the information entered. You edit information on the same page in which you added the record.
- Click the **Delete** link to permanently remove the entire record. To reinstate the record, you must click the **Add New** link and re-enter the information.
- Click the **Add** link to add another honor or award record to your application.
- Click the **Main** button to return to the EIF Main Menu.

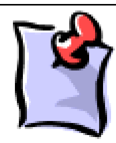
Languages



Click the **Languages** link on the EIF Main Menu to add any foreign language knowledge you have to your EIF.

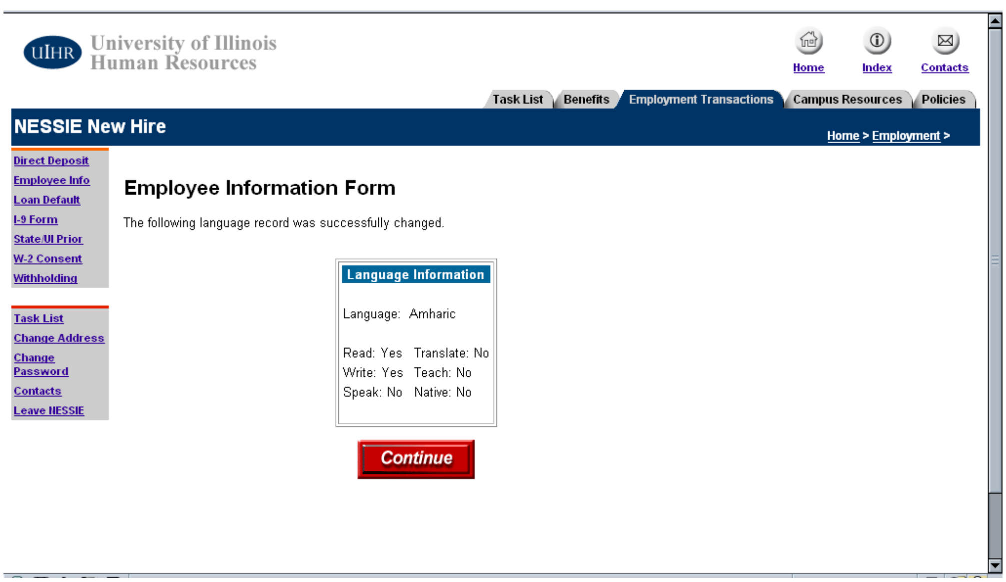
- Click the **Add New** link to add your language experience record.
- Click the **Main** button to return to the EIF Main Menu.



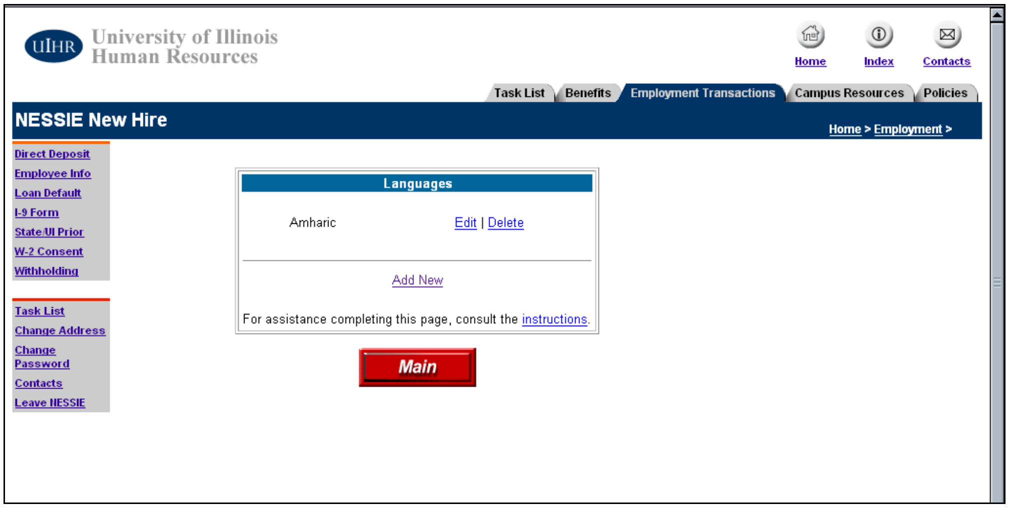


NOTE: If the language you want to add is not listed, email the HR Help Desk and they can add the language to the list.

- Select the **Language** from the drop-down list.
- Select the appropriate checkboxes to indicate your familiarity with the language chosen.
- Click the **Submit** button.



Review the new language record added and then click the **Continue** button.

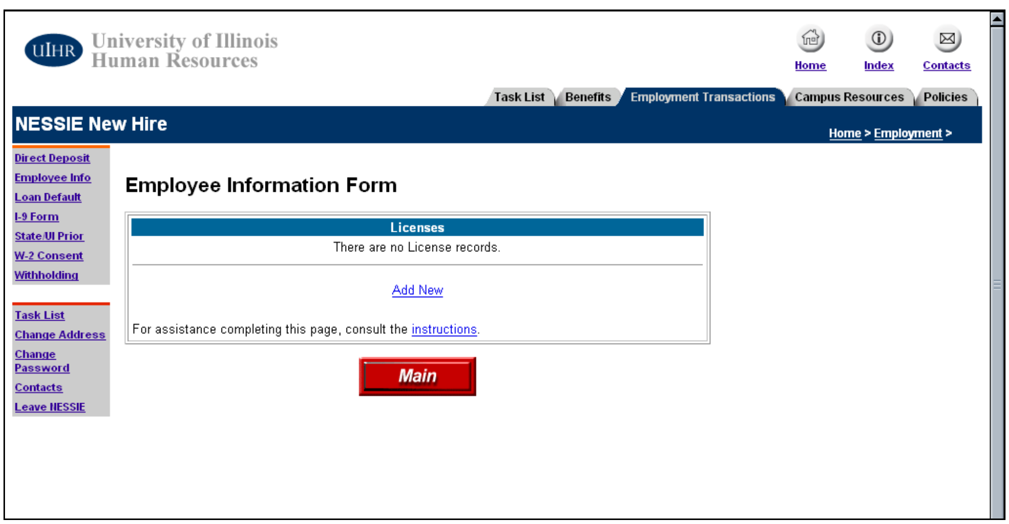


You return to the Language Information page. Your language experience record now displays.

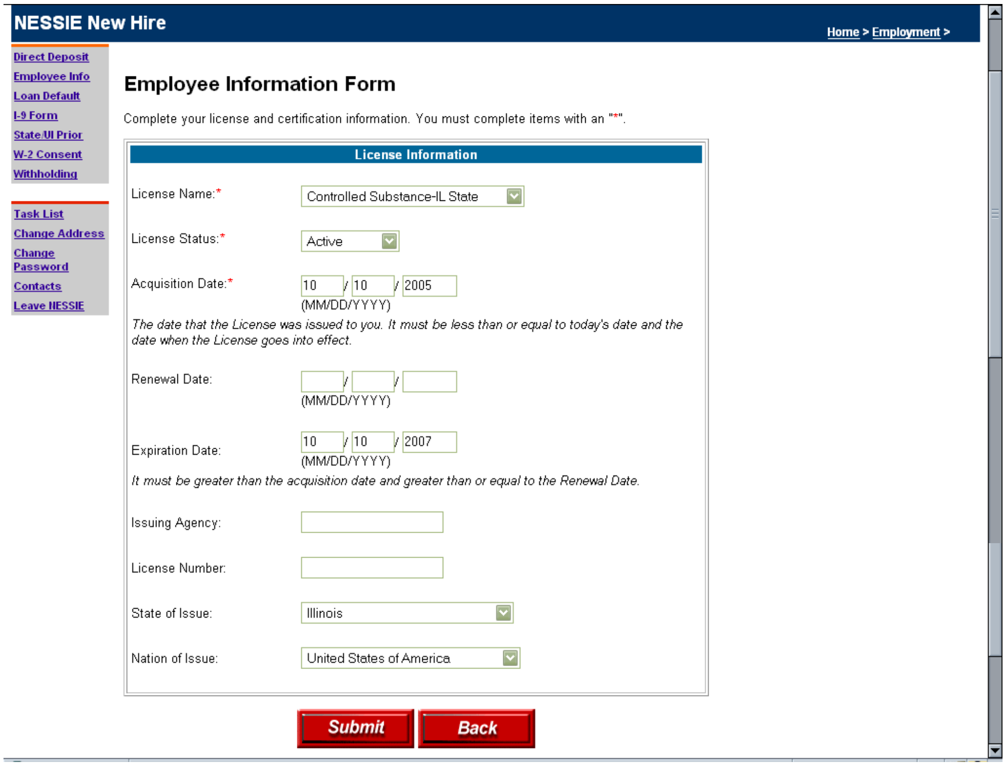
- Click the **Edit** link to update the information entered. You edit information on the same page in which you added the record.
- Click the **Delete** link to permanently remove the entire record. To reinstate the record, you must click the **Add** link and re-enter the information.
- Click the **Add New** link to add another language experience record to your application.
- Click the **Main** button to return to the EIF Main Menu.

Licenses

Click the **Licenses** link on the EIF Main Menu to add your professional license records to your EIF.



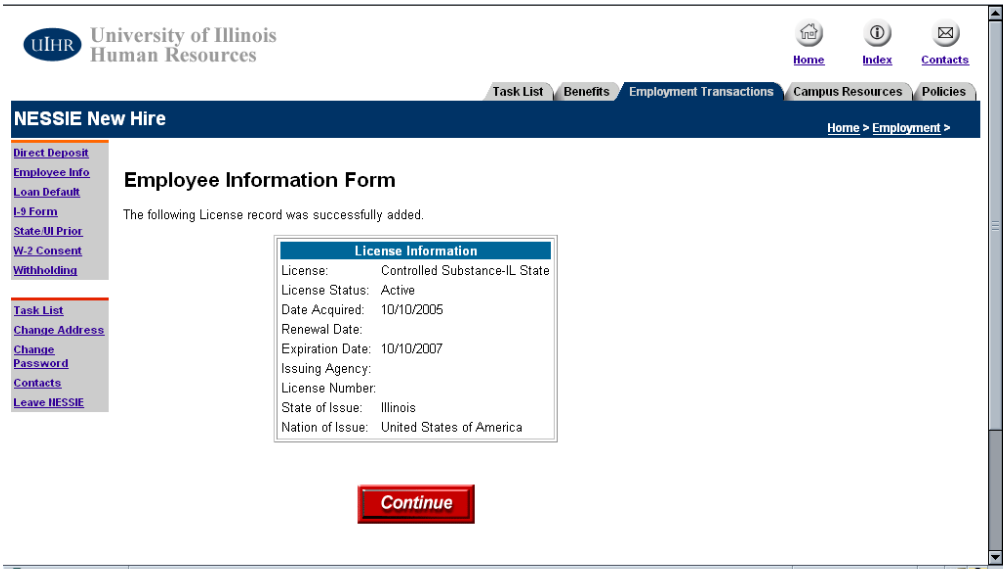
- Click the **Add New** link to add your license record.
- Click the **Main** button to return to the EIF Main Menu.



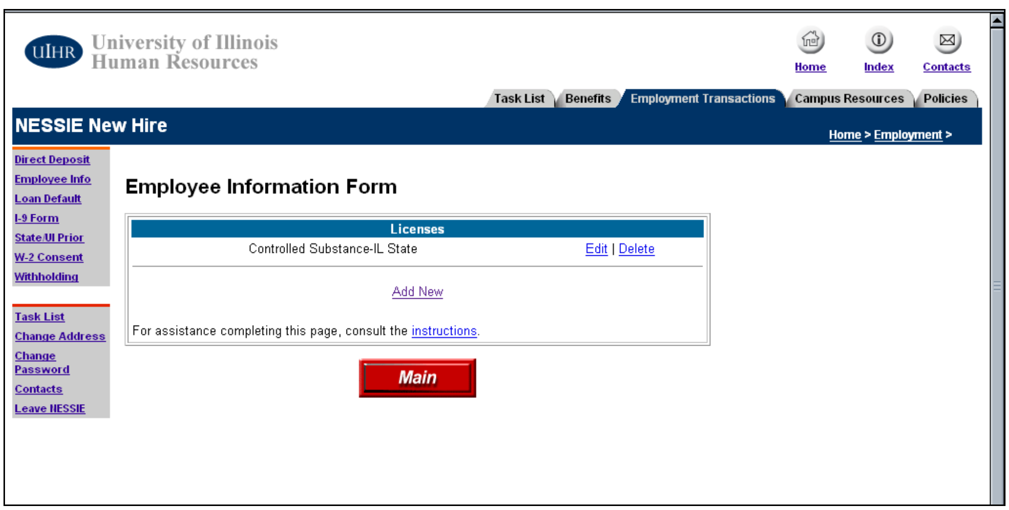
NOTE: You must complete all fields marked with a red asterisk (*).

NOTE: If the license you want to add is not listed, email the HR Help Desk and they can add the license name to the list.

- Select the **License Name** from the list.
- Select the status of your certification from the **License Status** list: *Active*, *Life-long*, *Revoked*, or *Suspended*.
- Enter the date you gained the license in the **Acquisition Date** field. You MUST enter the date in MM/DD/YYYY format.
- Enter the date you are due to renew your license in the **Renewal Date** field. You MUST enter the date in MM/DD/YYYY format.
- Enter the date your license expires, if applicable, in the **Expiration Date** field. You MUST enter the date in MM/DD/YYYY format.
- Enter the name of the **Issuing Agency** of the license.
- Enter the **License Number** on your license.
- Select the **State of Issue** and **Nation of Issue** of the license from the lists.
- Click the **Submit** button.



Review the new License record added and click the **Continue** button.

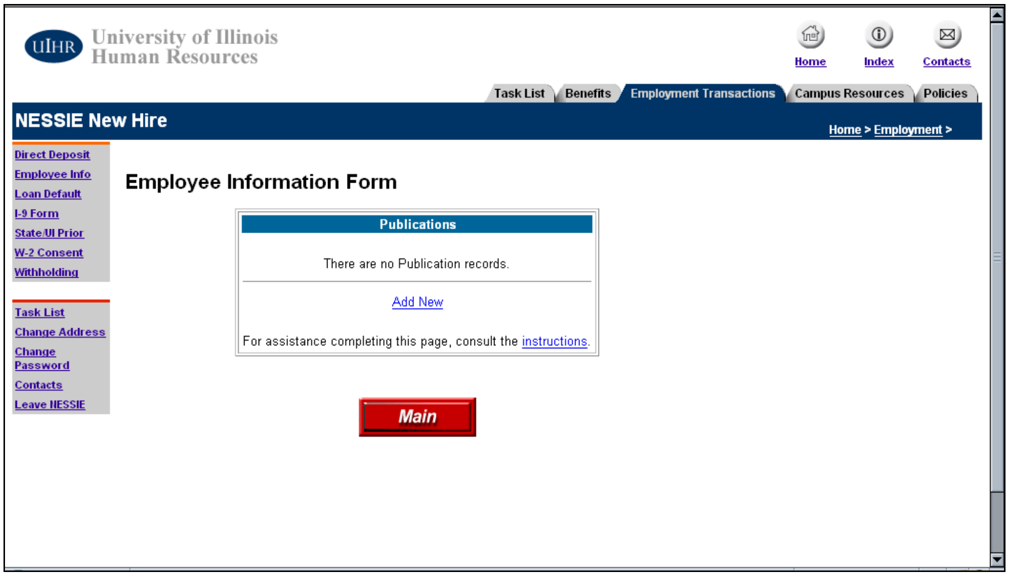


You return to the License Information page. Your license record now displays.

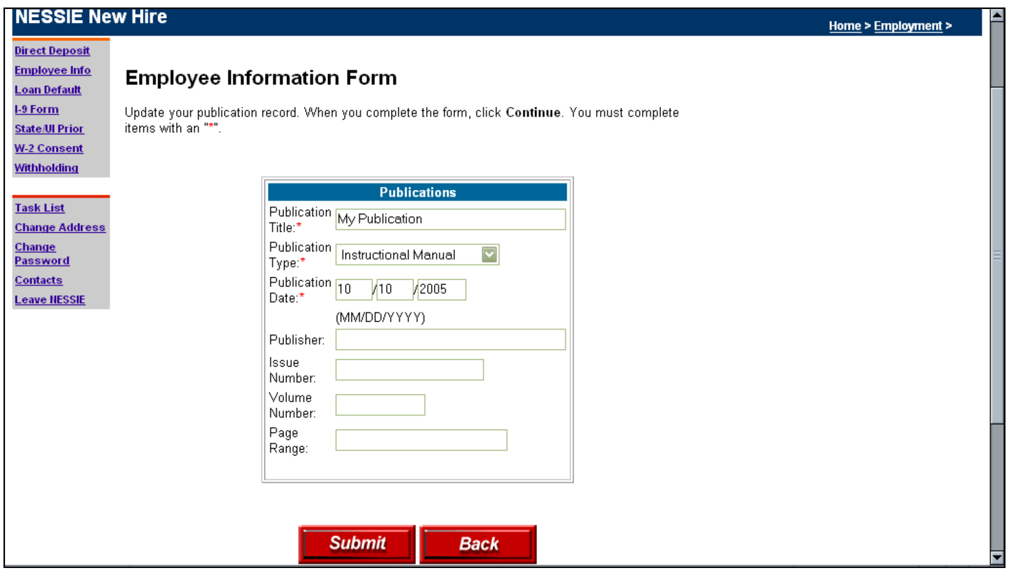
- Click the **Edit** link to update the information entered. You edit information on the same page in which you added the record.
- Click the **Delete** link to permanently remove the entire record. To reinstate the record, you must click the **Add New** link and re-enter the information.
- Click the **Add New** link to add another license record to your application.
- Click the **Main** button to return to the Employment Application Main Menu.

Publications

Click the **Publications** link on the EIF Main Menu to add records about any information you have published to your EIF.



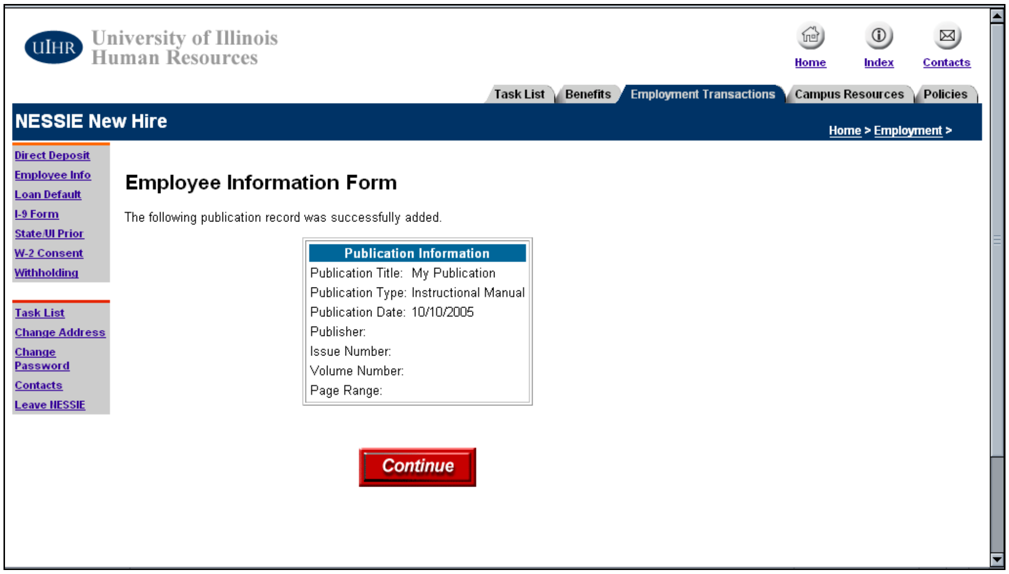
- Click the **Add New** link to add your publication record.
- Click the **Main** button to return to the EIF Main Menu.



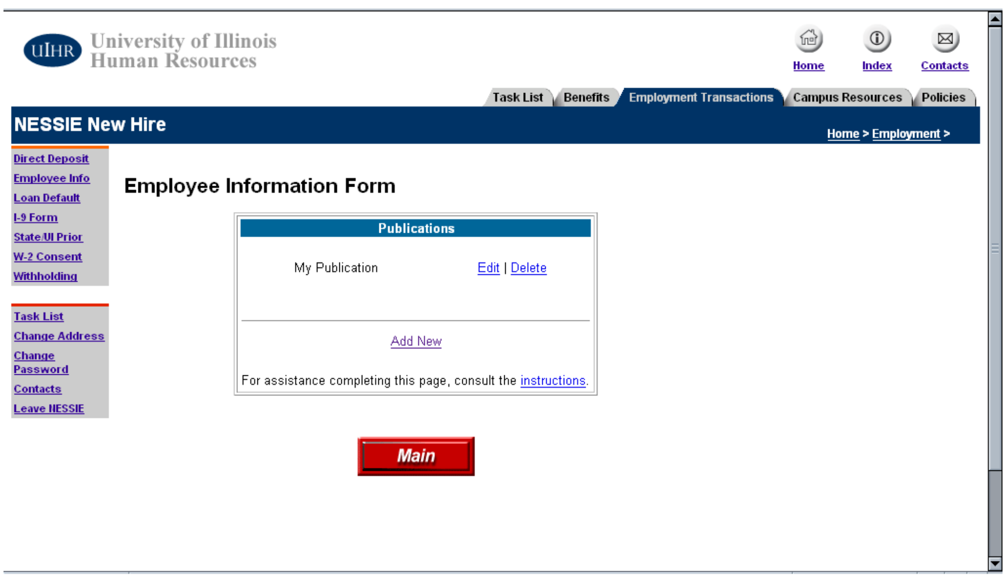
NOTE: You must complete all fields marked with a red asterisk (*).

- Enter the name of the publication where you were published in the **Publication Title** field.
- Select the **Publication Type** from the list.
- Enter the date your information was published in the **Publication Date** field. You MUST enter the date in MM/DD/YYYY format.
- Enter the name of the **Publisher**.

- Enter the **Issue Number** in which your work was published.
- Enter the **Volume Number** in which your work was published.
- Enter the **Page Range** where your work appeared in the publication.
- Click the **Submit** button.



Review the new Publication record added and click the **Continue** button.



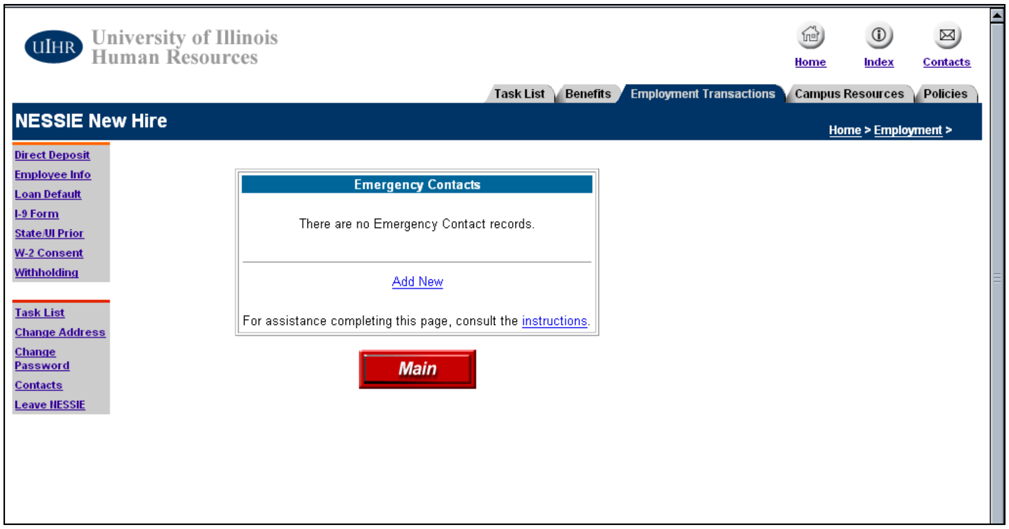
You return to the Publication Information page. Your publication record now displays.

- Click the **Edit** link to update the information entered. You edit information on the same page in which you added the record.
- Click the **Delete** link to permanently remove the entire record. To reinstate the record, you must click the **Add New** link and re-enter the information.

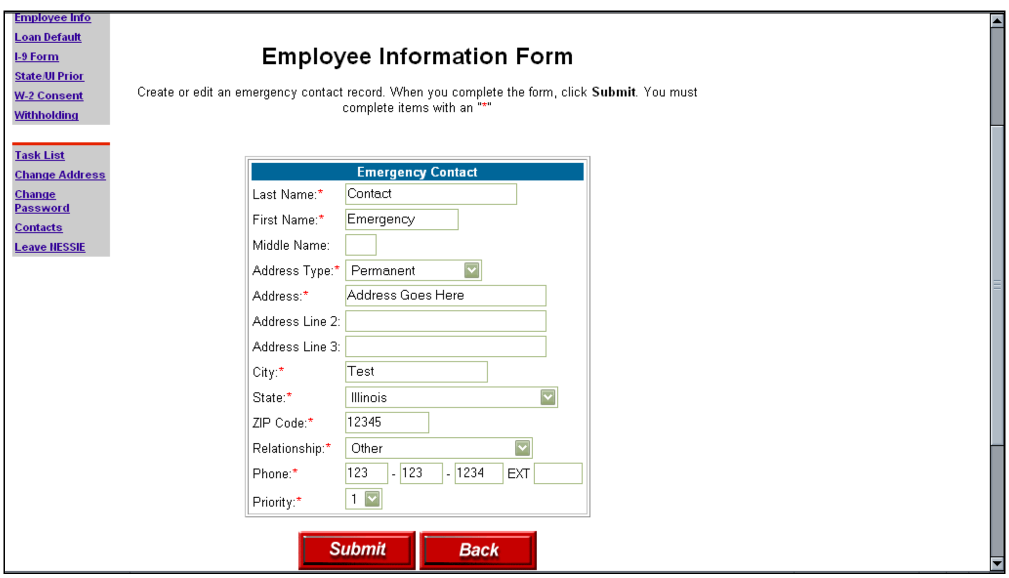
- Click the **Add New** link to add another publication record to your application.
- Click the **Main** button to return to the EIF Main Menu.

Emergency Contacts

Click the **Emergency Contacts** link on the EIF Main Menu to add Emergency Contact records.

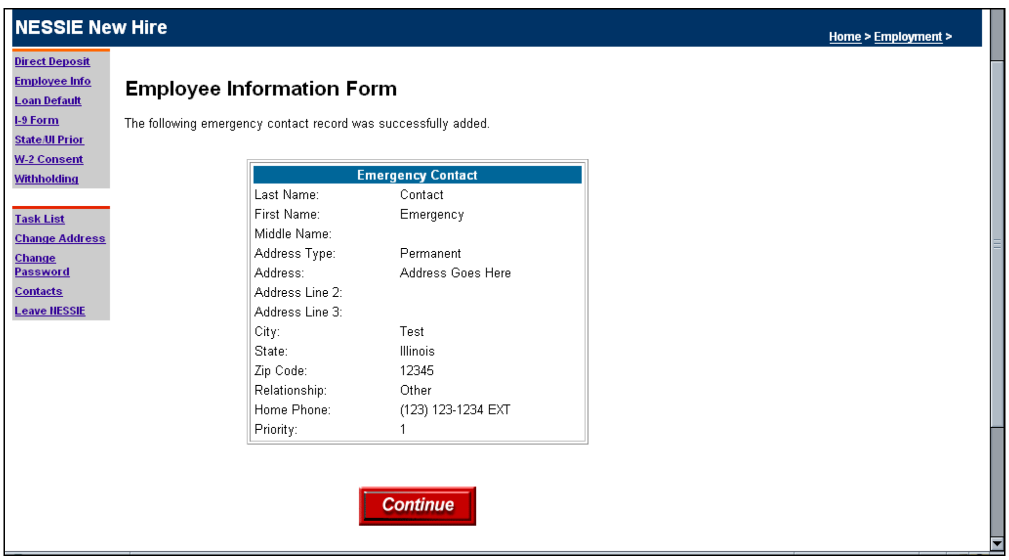


- Click the **Add New** link to add your Emergency Contact record.
- Click the **Main** button to return to the EIF Main Menu.



NOTE: You must complete all fields marked with a red asterisk (*).

- Enter the last name of your emergency contact in the **Last Name** field.
- Enter the fast name of your emergency contact in the **First Name** field.
- Enter the middle name of your emergency contact in the **Middle Name** field.
- Select the address type from the **Address Type** drop-down list: *Business Address or Permanent Address*.
- Enter the **Address** of your emergency contact.
- Enter the **City** of your emergency contact.
- Enter the **State** of your emergency contact.
- Enter the **Zip Code** of your emergency contact.
- Select the **Relationship** of your emergency contact from the drop-down list.
- Enter the **Phone Number** of your emergency contact.
- Select the **Priority** of your emergency contact from the drop-down list.
- Click the **Submit** button.



Review the new Emergency Contact record added and click the **Continue** button.

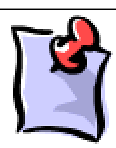
You return to the Emergency Contact Information page. Your emergency contact record now displays.

- Click the **Edit** link to update the information entered. You edit information on the same page in which you added the record.
- Click the **Delete** link to permanently remove the entire record. To reinstate the record, you must click the **Add New** link and re-enter the information.
- Click the **Add New** link to add another emergency contact record to your application.
- Click the **Main** button to return to the EIF Main Menu.

University Code of Conduct

Click the **University Code of Conduct** link from the EIF Main Menu to go to the University Code of Conduct website.

Read the University Code of Conduct from the website. Click the **Back** button on your browser to return to the New Hire EIF Main Menu.



NOTE: The University Code of Conduct Form will not be marked as being completed from this screen.

When you submit the EIF, you certify that you have read the University Code of Conduct. You may also complete the University Code of Conduct from the New Hire Task List.

Reviewing and Submitting the Employee Information Form

Once you finish entering the information on your EIF, you have the opportunity to review that information before submitting it.

The following images illustrate the information you might see on your online resume/employment application. The information that appears is based on the sections of the EIF you completed.

Demographic Information

NESSIE New Hire Home > Employment >

Direct Deposit
Employee Info
Loan Default
I-9 Form
State/UI Prior
W-2 Consent
Withholding

Task List
Change Address
Change Password

Employee Information Form

Review your Employee Information Form as it appears below. If the form is correct, click **Submit**.

Warning: You must click **Submit** for the form to be processed.

Employee Information Form

Demographics

Name: **Tanya Smith Wood**

License, Citizenship, Relatives Information

License Information

Have you ever had any license denied, suspended, revoked, etc.?
N

Citizenship Information

Country of Citizenship: **US**
Are you a permanent resident?
Visa Type:
Visa Expiration Date:
Admission Number:

Relatives

Are you related by blood or marriage to any member of the Board of Trustees, faculty or staff of the University of Illinois? **Y**

Relative Name: **Tanya Test**
Relationship: **Test**
Department: **Test**

Education Information

Education

Univ of IL Urbana-Champaign
Degrees
Aviation Cert: Electronics
05/05/1995 - 05/05/2000
Degree Date: **05/2000**
GPA: **3.75**
Hours Earned: **137**
Majors
Accountancy
Bachelor of Science
08/25/1990 - 05/19/1995
Degree Date: **05/1995**
GPA: **3.75**
Hours Earned: **137**
Majors
Magnetic Resonance Imaging

High School
Degrees
High School Grad
08/17/1991 - 05/05/1995
Degree Date: **05/1995**

Work History, Certifications, Drivers Licenses Information

Work History

10/10/2001 - 12/31/2004
Test Position
Example Organization
Duties: **Enter Duties Here**
Reason Left: **Enter Reason for Leaving Here**

Certifications

Certification: **CPR**
Certification Status: **Active**
Issuing Agency:
Date Acquired: **05/15/2005**
Next Certification Date:
Expiration Date: **05/15/2007**
Certification Number:
State of Issue: **Illinois**
Nation of Issue: **United States of America**

Drivers Licenses

License Class: **Passenger Driver's License**
License Status: **Current**
License Number: **123456789**
Effective Date: **10/10/2005**
Expiration Date: **10/10/2010**
State of Issue: **Illinois**

Honors and Awards, Languages, Licenses Information

Honors and Awards

Recognition Name: **Award Name**
Awarding Organization: **Awarding Organization Title**
Date of Recognition: **10/10/2005**
Expiration Date: **10/10/2007**

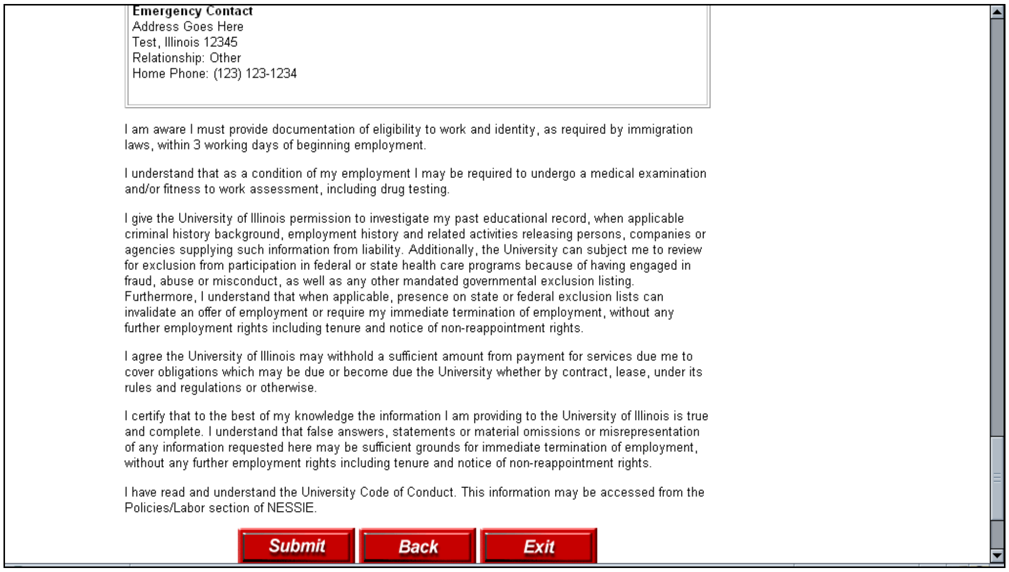
Languages

Language: **Amharic**
Skill Level: **Read**
Write

Licenses

License: **Controlled Substance-IL State**
License Status: **Active**
Issuing Agency:
Date Acquired: **10/10/2005**
Next License Date:
Expiration Date: **10/10/2007**
License Number:
State of Issue: **Illinois**
Nation of Issue: **United States of America**

Emergency Contact and Submit



Emergency Contact
Address Goes Here
Test, Illinois 12345
Relationship: Other
Home Phone: (123) 123-1234

I am aware I must provide documentation of eligibility to work and identity, as required by immigration laws, within 3 working days of beginning employment.

I understand that as a condition of my employment I may be required to undergo a medical examination and/or fitness to work assessment, including drug testing.

I give the University of Illinois permission to investigate my past educational record, when applicable criminal history background, employment history and related activities releasing persons, companies or agencies supplying such information from liability. Additionally, the University can subject me to review for exclusion from participation in federal or state health care programs because of having engaged in fraud, abuse or misconduct, as well as any other mandated governmental exclusion listing. Furthermore, I understand that when applicable, presence on state or federal exclusion lists can invalidate an offer of employment or require my immediate termination of employment, without any further employment rights including tenure and notice of non-reappointment rights.

I agree the University of Illinois may withhold a sufficient amount from payment for services due me to cover obligations which may be due or become due the University whether by contract, lease, under its rules and regulations or otherwise.

I certify that to the best of my knowledge the information I am providing to the University of Illinois is true and complete. I understand that false answers, statements or material omissions or misrepresentation of any information requested here may be sufficient grounds for immediate termination of employment, without any further employment rights including tenure and notice of non-reappointment rights.

I have read and understand the University Code of Conduct. This information may be accessed from the Policies/Labor section of NESSIE.

Submit Back Exit

Review the information that appears on this page. The information shown here is EXACTLY what your department will see your information when they view your EIF. If you want to make any changes to the information, click the link for the section you want to edit and follow the instructions outlined earlier in this document.

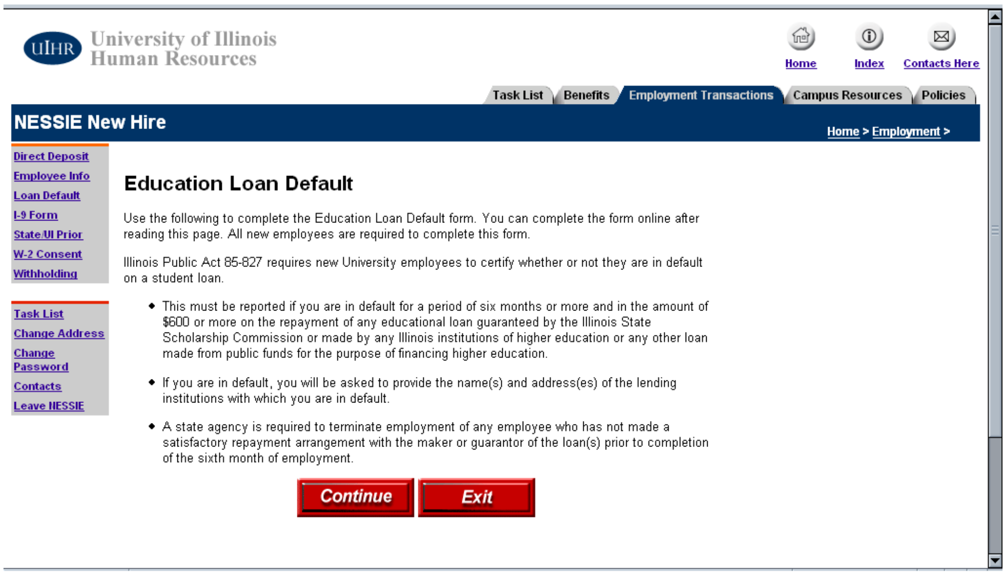
Once you finish reviewing your information, your EIF is not complete until you click the **Submit** button at the bottom of this page.

- **YOU MUST CLICK SUBMIT TO COMPLETE YOUR EIF**.

Loan Default

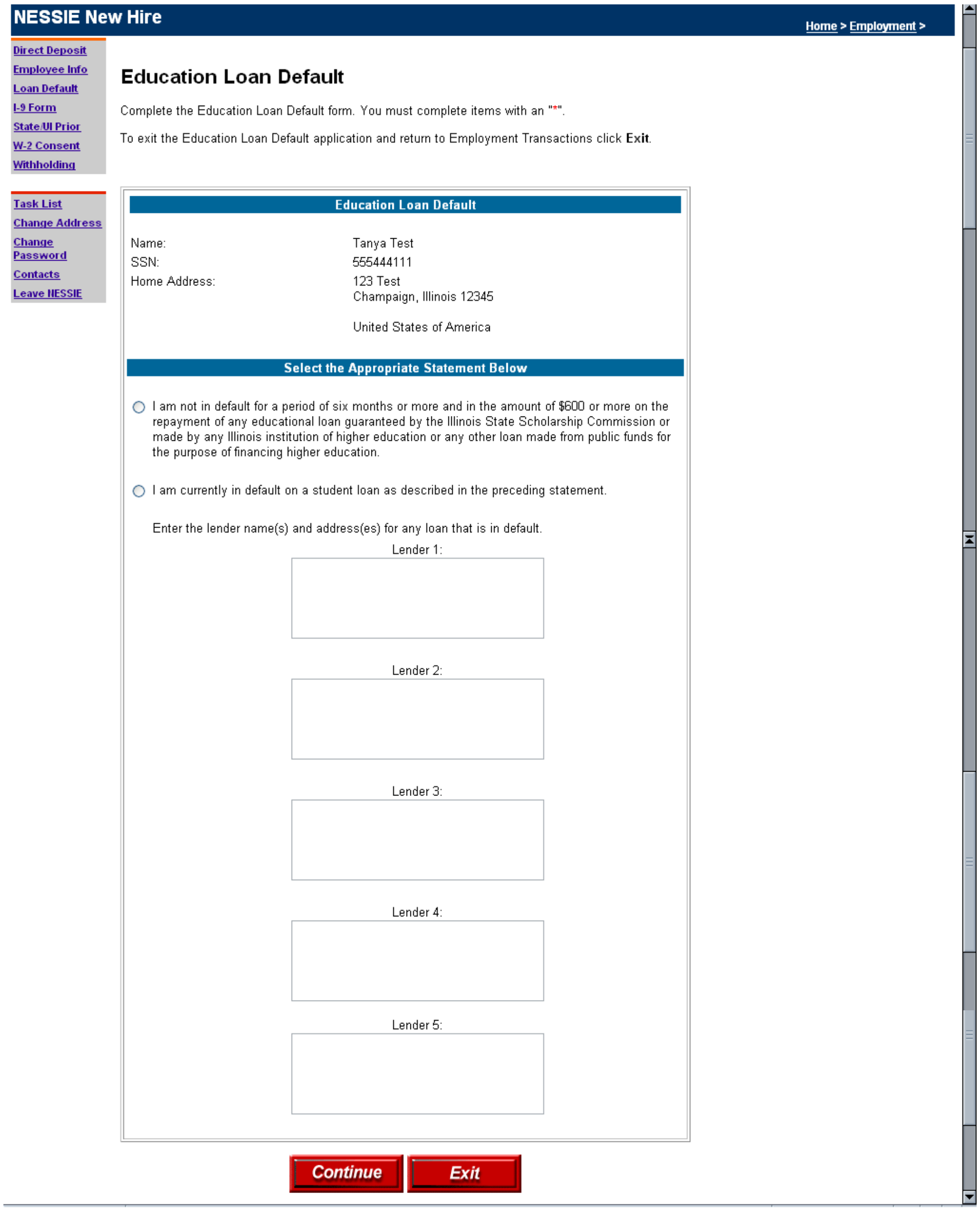
This form will allow you to indicate whether or not you are in default of a student loan. You must report if you are in default for a period of six months or more and in the amount of $600 or more on the repayment of any educational loan guaranteed by the Illinois State Scholarship Commission or made by any Illinois institutions of higher education or any other loan made from public funds for the purpose of financing higher education.

If you are in default, you will be asked to provide the name(s) and address(es) of the lending institutions with which you are in default.



Read the information on the **Education Loan Default** page.

- Click the **Continue** button.



NESSIE New Hire

Home > Employment >

Direct Deposit
Employee Info
Loan Default
I-9 Form
State/UI Prior
W-2 Consent
Withholding

Task List
Change Address
Change Password
Contacts
Leave NESSIE

Education Loan Default

Complete the Education Loan Default form. You must complete items with an "*".

To exit the Education Loan Default application and return to Employment Transactions click **Exit**.

Education Loan Default

Name:	Tanya Test
SSN:	555444111
Home Address:	123 Test Champaign, Illinois 12345 United States of America

Select the Appropriate Statement Below

◯ I am not in default for a period of six months or more and in the amount of $600 or more on the repayment of any educational loan guaranteed by the Illinois State Scholarship Commission or made by any Illinois institution of higher education or any other loan made from public funds for the purpose of financing higher education.

◯ I am currently in default on a student loan as described in the preceding statement.

Enter the lender name(s) and address(es) for any loan that is in default.

Lender 1:

Lender 2:

Lender 3:

Lender 4:

Lender 5:

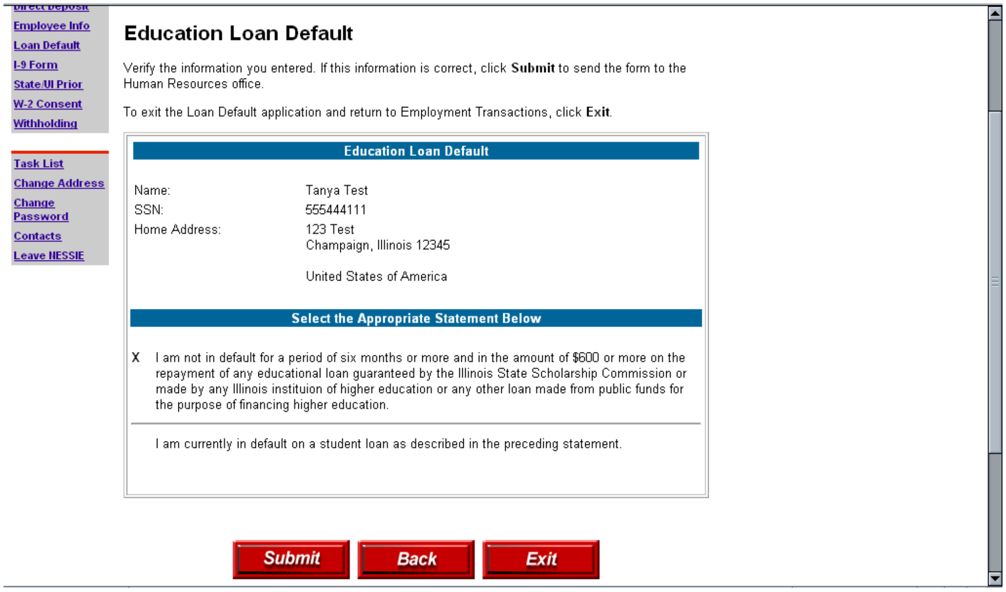
Continue Exit

Select the appropriate radio button to indicate:

- **I am not in default** for a period of six months or more…
- **I am currently in default** on a student loan as described in the preceding statement.

NOTE: If you are currently in default of a student loan you must provide the name(s) and address(es) of the lending institutions with which you are in default in the provided **Lender** boxes on the Loan Default Form.

- Click the **Continue** button.

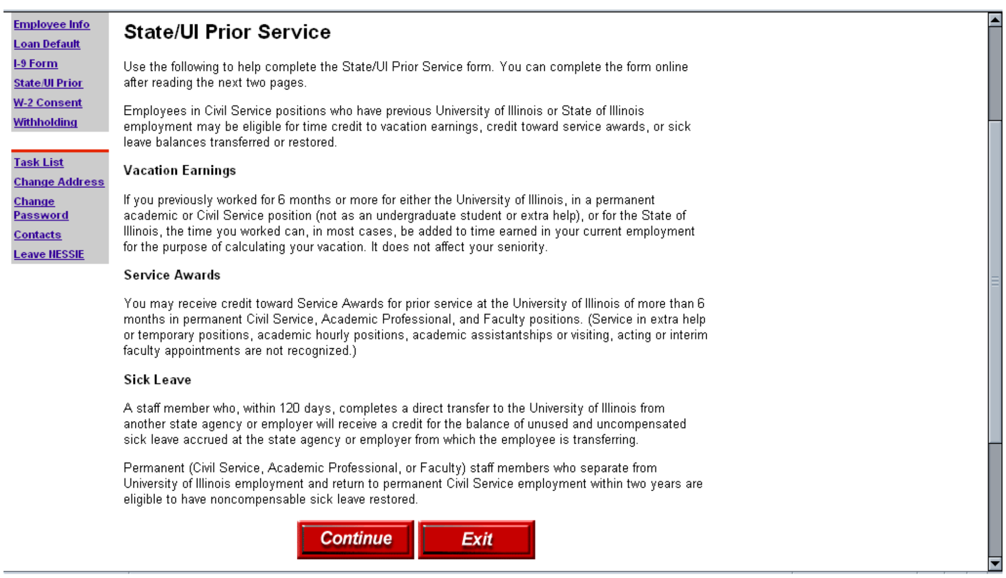


Verify the information you have entered. The choice you indicated will have an X showing to the left of it.

- Click the **Submit** button to submit the Loan Default Form.
- After submitting the Loan Default Form, you will receive a confirmation page. Click the **Exit** button on the confirmation page to continue with your new hire forms.

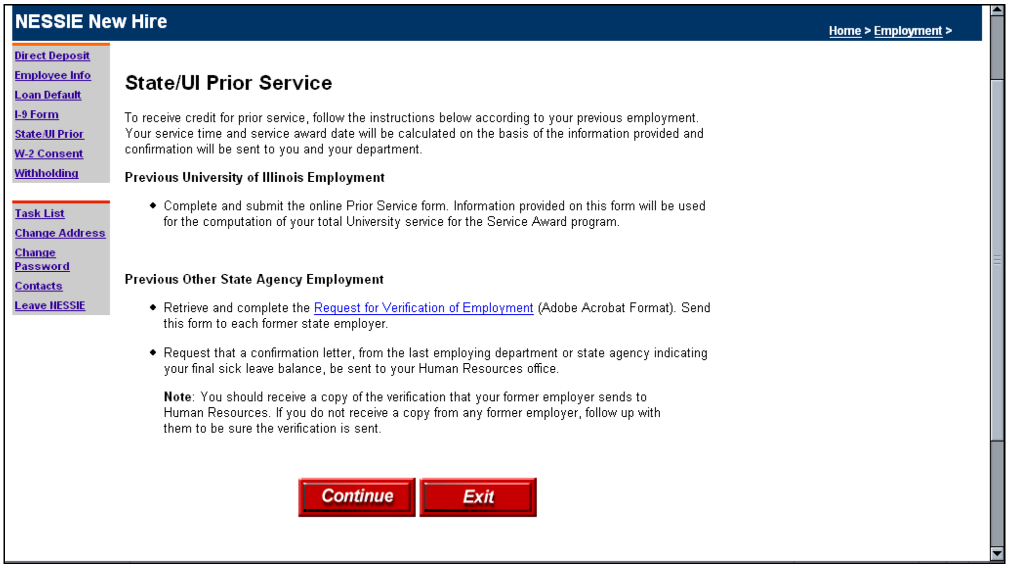
Prior Service

This form allows Civil Service employees to report previous University of Illinois or State of Illinois employment. These employees may be eligible for time credit to vacation earnings, credit toward service awards, or sick leave balances transferred or restored.

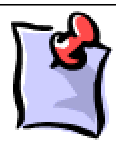


Read the information on the **State/UI Prior Service** form.

- Click the Continue button.

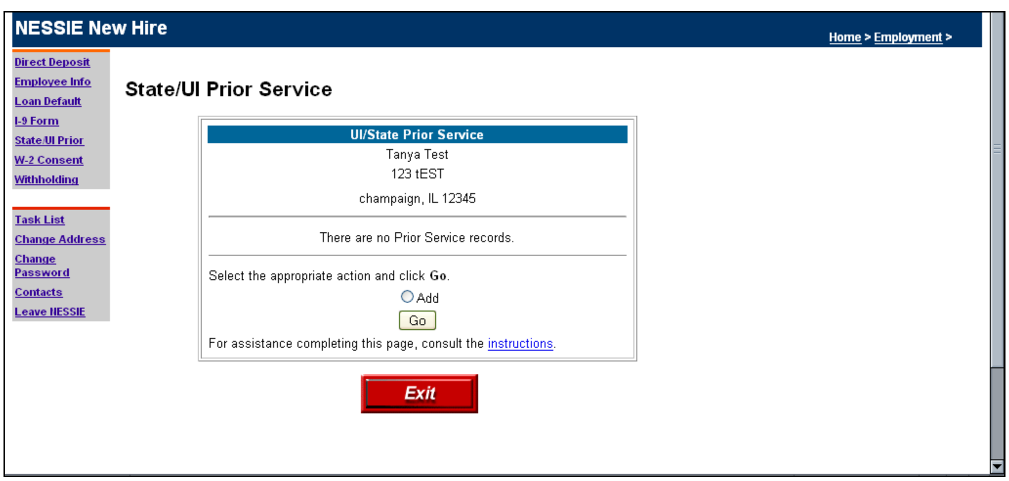


- If you are previously employed by another State of Illinois agency, click the **Request for Verification of Employment** link to complete and send that form to each former state employer.
  - o Request that a confirmation letter, from the last employing department or state agency indicating your final sick leave balance, be sent to your Human Resources office.

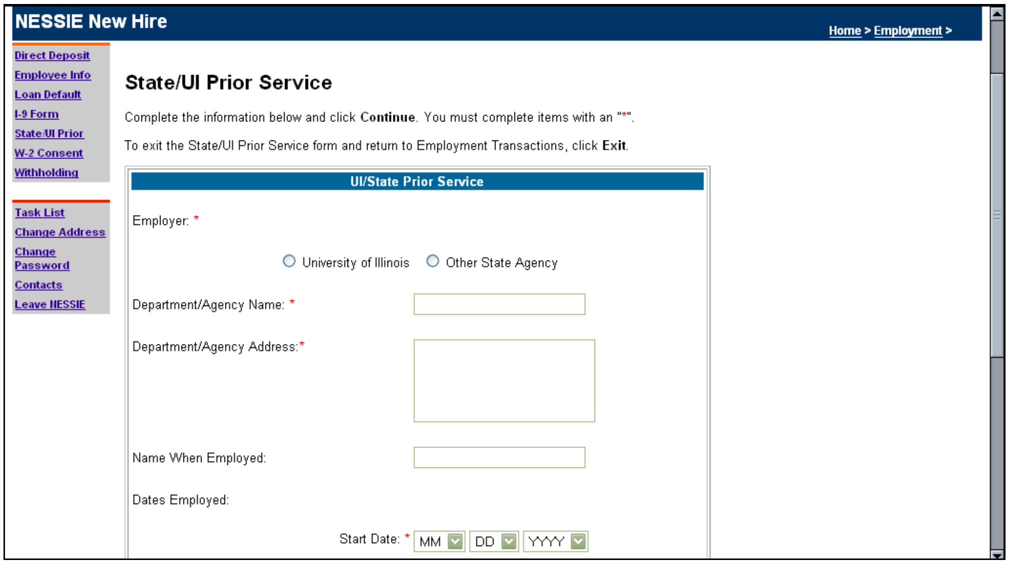


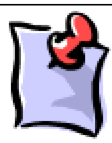
NOTE: You should receive a copy of the verification that your former employer sends to Human Resources. If you do not receive a copy from any former employer, follow up with them to be sure the verification is sent.

- Clicking the **Exit** button at any point in the form will exit the State/UI Prior Service form.



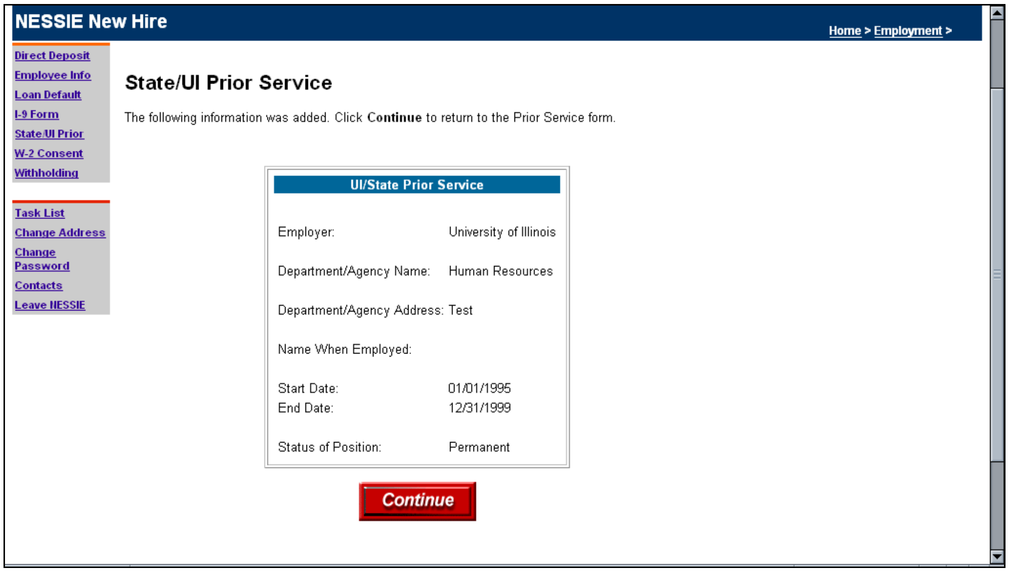
- Select the **Add** radio button.
- Click the **Go** button





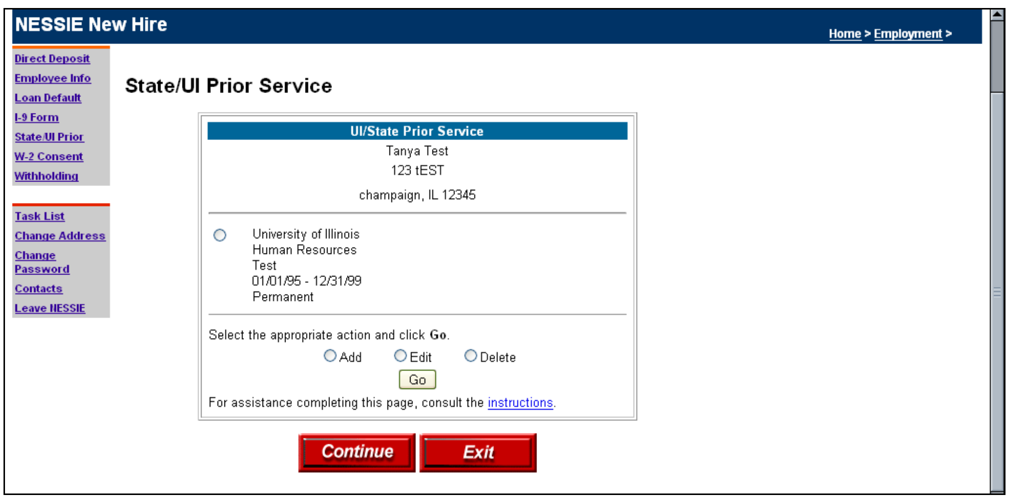
NOTE: You must complete all fields marked with a red asterisk (*).

- Select an **Employer**: University of Illinois or Other State Agency.
- Enter the Department or Agency **Name.**
- Enter the Department or Agency **Address.**
- Enter your **Name When Employed** (optional).
- Enter the **Dates Employed**.
- Place a check in the checkbox for al that apply regarding your previous employment:
    - **Permanent**
    - **Temporary**
    - **Part-time**
    - **Full-time**
- Click the **Continue** button.



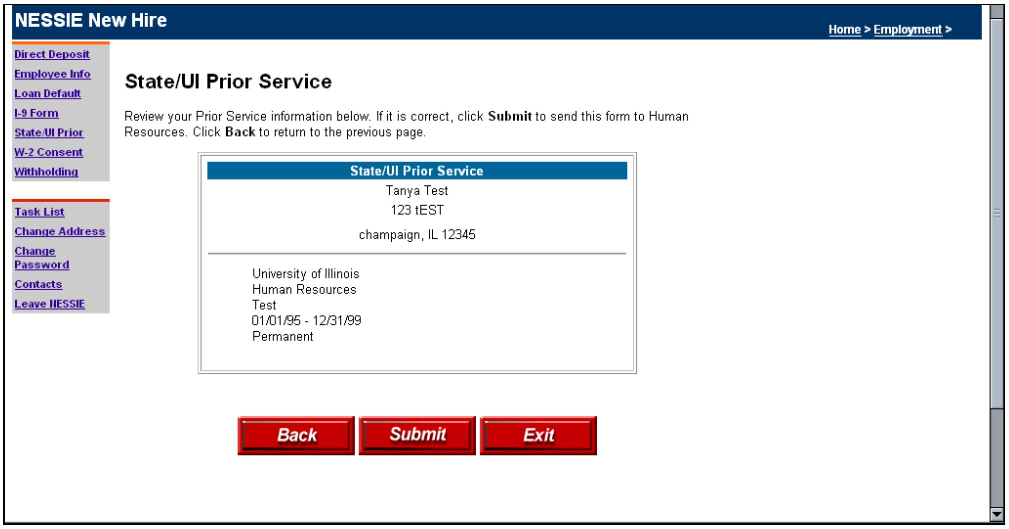
Review the information you have added.

- Click the **Continue** button.



You will return to the State/UI Prior Service menu. You will see the record you have added.

- To **Add** an additional record, select the **Add** radio button and click the **Go** button.
- To **Edit** a record, select the radio button next to the record you want to edit. Select the **Edit** radio button and click the **Go** button.
- To **Delete** a record, select the radio button next to the record you want to delete. Select the **Delete** radio button and click the **Go** button.
- Click the **Continue** button to go to a review page before submitting your form.



Review the information on the State/UI Prior Service Form

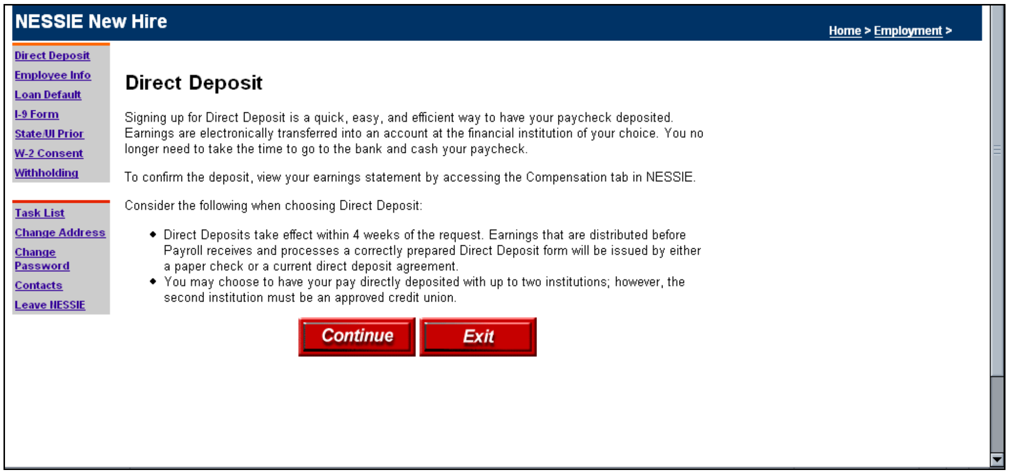
- Click the **Back** button to go back and make any necessary changes.
- Click the **Submit** button to submit the State/UI Prior Service form.

Payroll Forms

This section will allow you to complete the necessary payroll forms.

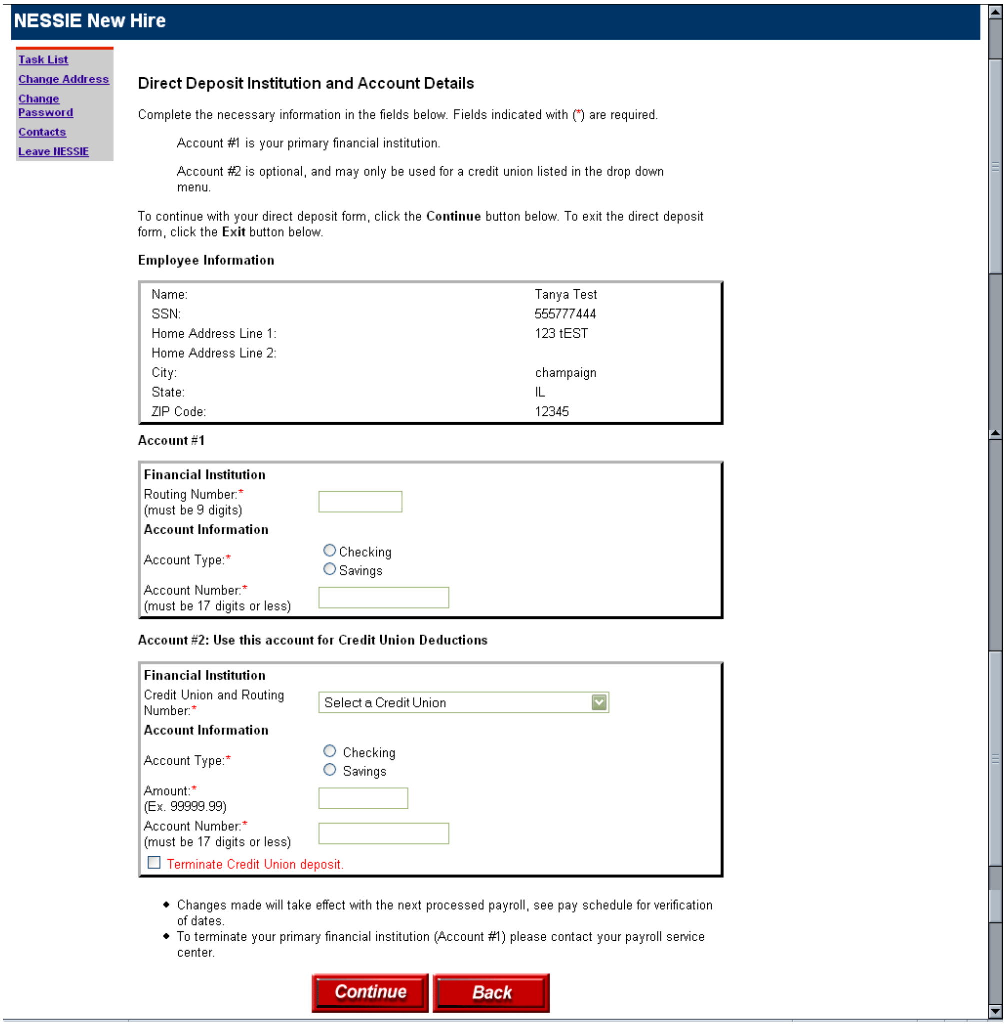
Direct Deposit

This form allows you to sign up for Direct Deposit. Direct Deposit will enable your earnings to be electronically transferred into an account at the financial institution of your choice.



Read the Direct Deposit information.

- Click the **Continue** button to continue to complete the Direct Deposit form.
- Clicking the **Exit** button at any point in the form will exit the Direct Deposit form.



NESSIE New Hire

Task List
Change Address
Change Password
Contacts
Leave NESSIE

Direct Deposit Institution and Account Details

Complete the necessary information in the fields below. Fields indicated with (*) are required.

Account #1 is your primary financial institution.

Account #2 is optional, and may only be used for a credit union listed in the drop down menu.

To continue with your direct deposit form, click the **Continue** button below. To exit the direct deposit form, click the **Exit** button below.

Employee Information

Name:	Tanya Test
SSN:	555777444
Home Address Line 1:	123 tEST
Home Address Line 2:	
City:	champaign
State:	IL
ZIP Code:	12345

Account #1

Financial Institution
Routing Number:* (must be 9 digits)
Account Information
Account Type:* Checking / Savings
Account Number:* (must be 17 digits or less)

Account #2: Use this account for Credit Union Deductions

Financial Institution
Credit Union and Routing Number:* Select a Credit Union
Account Information
Account Type:* Checking / Savings
Amount:* (Ex. 99999.99)
Account Number:* (must be 17 digits or less)
Terminate Credit Union deposit.

- Changes made will take effect with the next processed payroll, see pay schedule for verification of dates.
- To terminate your primary financial institution (Account #1) please contact your payroll service center.

Continue Back

<u>Account 1</u>: Account 1 is a required account for Direct Deposit. You must enter information in Account 1 to complete the Direct Deposit form.

Enter the following Financial Institution and Account Information in the **Account #1** box:

- Enter the **Routing Number** (must be 9 digits).
- Select the radio button next to the **Account Type** of your choice (Checking or Savings).
- Enter your **Account Number** (must be 17 digits or less).

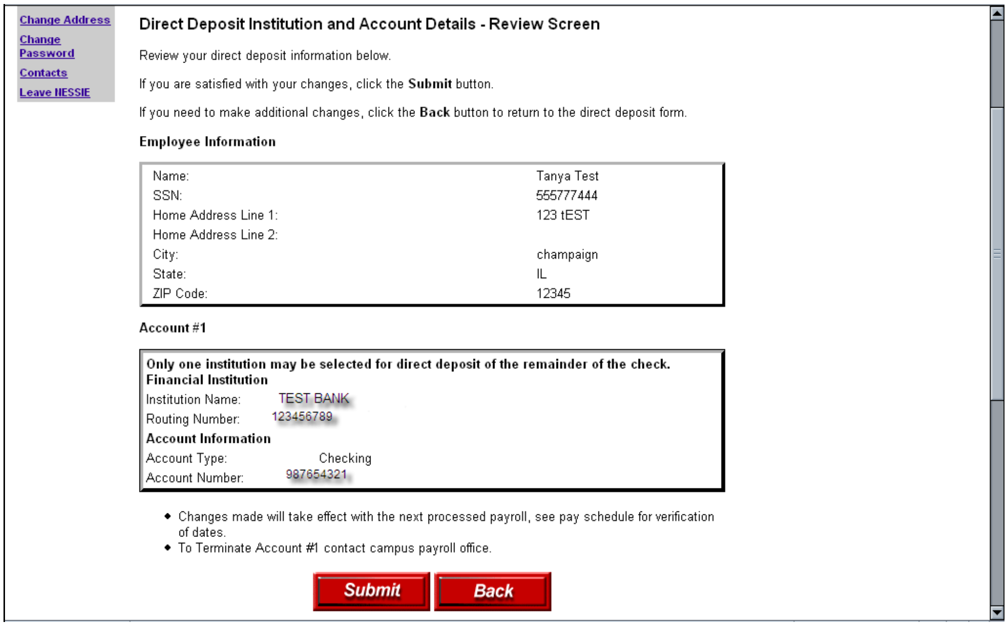
<u>Account 2</u>: Account 2 is an account used for **Credit Union Deductions ONLY**. It is not required to have an Account 2.

Enter the following Financial Institution and Account Information in the **Account #2** box:

- Select the appropriate **Credit Union** and associated **Routing Number** from the drop-down box.
- Select the radio button next to the **Account Type** of your choice (Checking or Savings).
- Enter the **Amount** of your earnings you want to have transferred to this account.
- Enter your **Account Number** (must be 17 digits or less).

- Put a check in the **Terminate Credit Union deposit** checkbox to terminate your credit union deductions at any time.
- Click the **Continue** button.

You will come to a **Direct Deposit Review Screen**

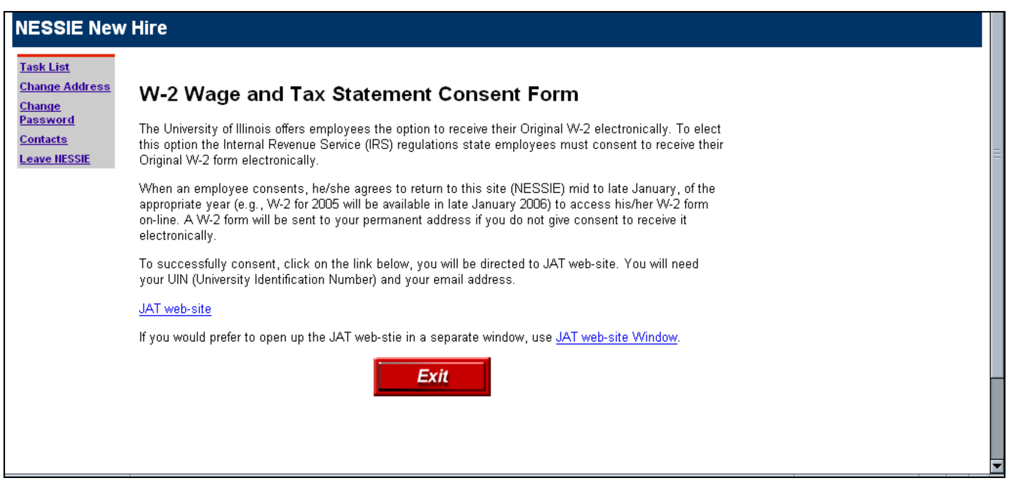


Review your Direct Deposit information

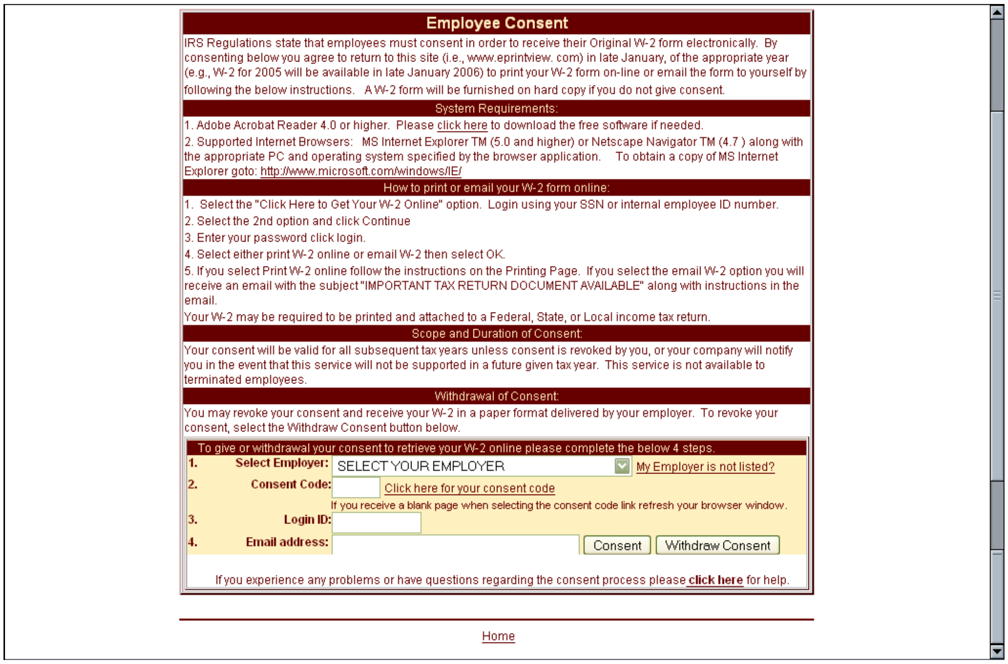
- Click the **Submit** button to submit the form.

W2 Consent Form

The W2 Consent Form will allow you to give consent to receive your Original W-2 electronically. This is not a required form.



- Click the **JAT website** link to access the W2 Consent Form. Click the **JAT web-site Window** link to open the W2 Consent form in a separate browser window.



Employee Consent

IRS Regulations state that employees must consent in order to receive their Original W-2 form electronically. By consenting below you agree to return to this site (i.e., www.eprintview. com) in late January, of the appropriate year (e.g., W-2 for 2005 will be available in late January 2006) to print your W-2 form on-line or email the form to yourself by following the below instructions. A W-2 form will be furnished on hard copy if you do not give consent.

System Requirements:

1. Adobe Acrobat Reader 4.0 or higher. Please click here to download the free software if needed.
2. Supported Internet Browsers: MS Internet Explorer TM (5.0 and higher) or Netscape Navigator TM (4.7) along with the appropriate PC and operating system specified by the browser application. To obtain a copy of MS Internet Explorer goto: http://www.microsoft.com/windows/IE/

How to print or email your W-2 form online:

1. Select the "Click Here to Get Your W-2 Online" option. Login using your SSN or internal employee ID number.
2. Select the 2nd option and click Continue
3. Enter your password click login.
4. Select either print W-2 online or email W-2 then select OK.
5. If you select Print W-2 online follow the instructions on the Printing Page. If you select the email W-2 option you will receive an email with the subject "IMPORTANT TAX RETURN DOCUMENT AVAILABLE" along with instructions in the email.

Your W-2 may be required to be printed and attached to a Federal, State, or Local income tax return.

Scope and Duration of Consent:

Your consent will be valid for all subsequent tax years unless consent is revoked by you, or your company will notify you in the event that this service will not be supported in a future given tax year. This service is not available to terminated employees.

Withdrawal of Consent:

You may revoke your consent and receive your W-2 in a paper format delivered by your employer. To revoke your consent, select the Withdrawal Consent button below.

To give or withdrawal your consent to retrieve your W-2 online please complete the below 4 steps.

1. Select Employer: SELECT YOUR EMPLOYER My Employer is not listed?
2. Consent Code: Click here for your consent code
If you receive a blank page when selecting the consent code link refresh your browser window.
3. Login ID:
4. Email address: Consent Withdraw Consent

If you experience any problems or have questions regarding the consent process please click here for help.

Home

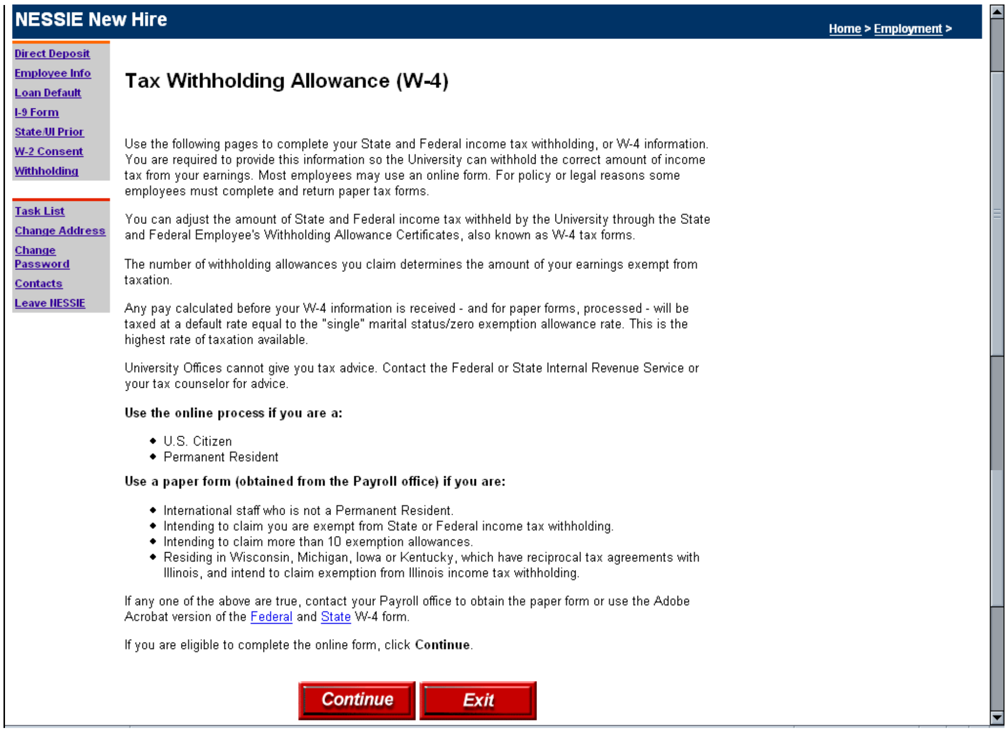
Read the Employee Consent information.

To give or withdraw consent to receive your W2 online:

- Select **Employer** from the drop-down list
- Enter your **Consent Code** (click the **click here for your consent code** link to retrieve your consent code).
- Enter your **Logon ID**. This is your **9-digit UIN** (the blue number on your i-Card).
- Enter your **Email address**.
- Click the **Consent** button to give consent. Click the **Withdraw Consent** button to withdraw your consent.

Withholding Allowance (W4)

The Withholding Allowance (W4) form will allow you to complete your State and Federal income tax withholding, or W-4 information. You are required to provide this information so the University can withhold the correct amount of income tax from your earnings.



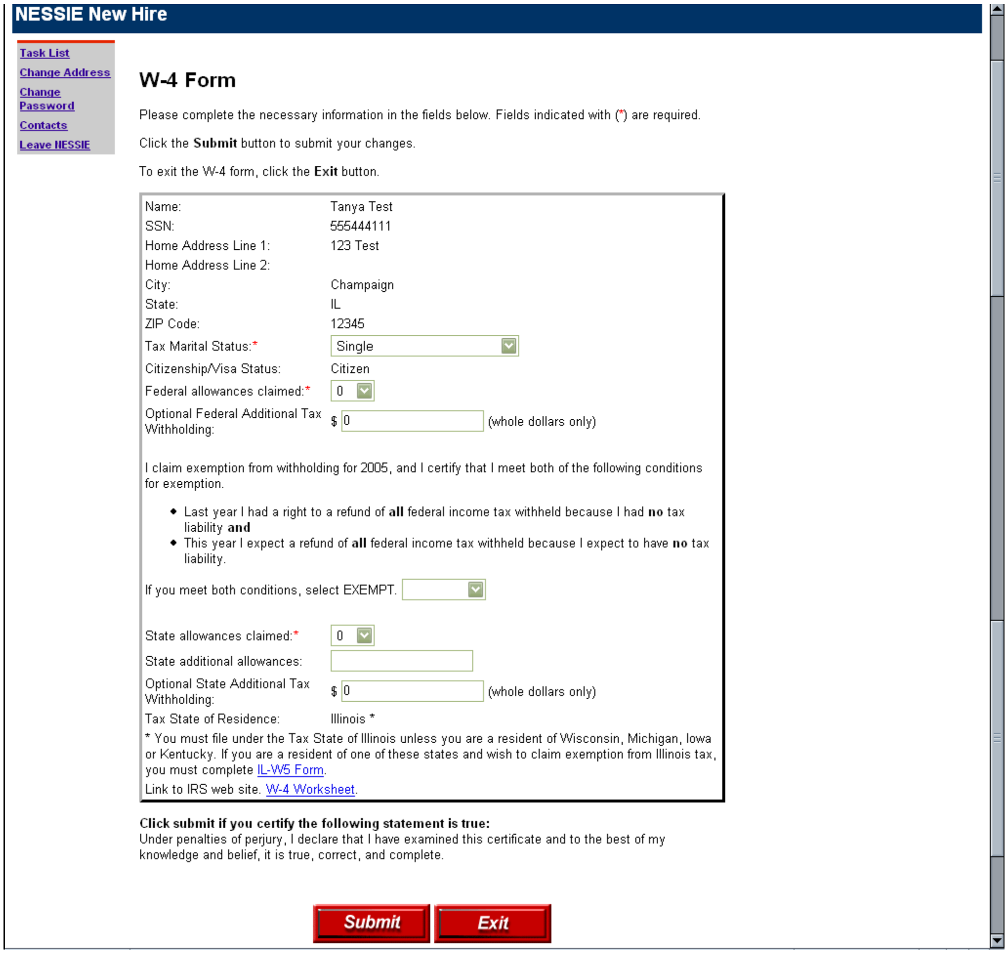
Read the W4 form information.

NOTE: The **Withholding** form is a required form that may only be completed online in NESSIE New Hire if you are a U.S. Citizen or a Permanent Resident.

If you are NOT a U.S. Citizen or Permanent Resident, of if you meet any of the criteria below, you will need to contact your campus Payroll Office to complete a paper form:

- Intending to claim you are exempt from State or Federal income tax withholding.
- Intending to claim more than 10 exemption allowances.
- Residing in Wisconsin, Michigan, Iowa or Kentucky, which have reciprocal tax agreements with Illinois, and intend to claim exemption from Illinois income tax withholding.

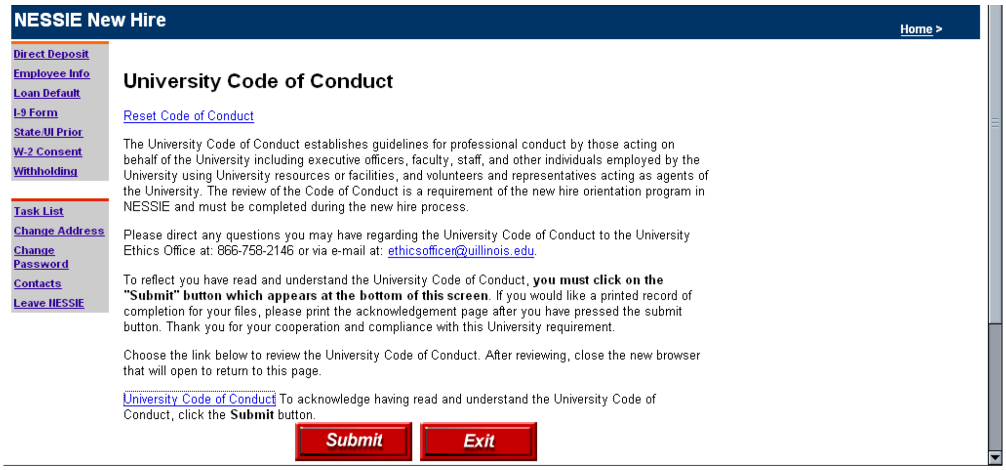
- Click the **Continue** button.



- Select your Tax Marital Status.
- Enter the number of Federal allowances you want to claim in the **Federal allowances claimed** drop-down box.
- Enter any **Optional Federal Additional Tax Withholdings** (whole dollars only).
- If you are exempt from withholdings, ready the exemption claim and select **Exempt** from the drop-down box.
- Enter the number of **State** allowances you want to claim in the **State allowances claimed** drop-down box.
- Enter any **State additional allowances**.
- Enter any **Optional State Additional Tax Withholdings** (whole dollars only).
- Click the **Submit** button.

University Code of Conduct Form

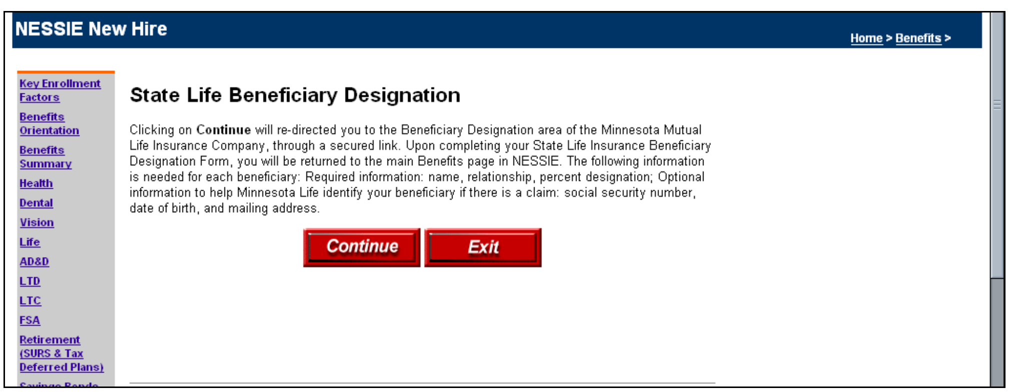
All employees are required to read the University of Illinois Code of Ethics, which establishes guidelines for professional conduct.



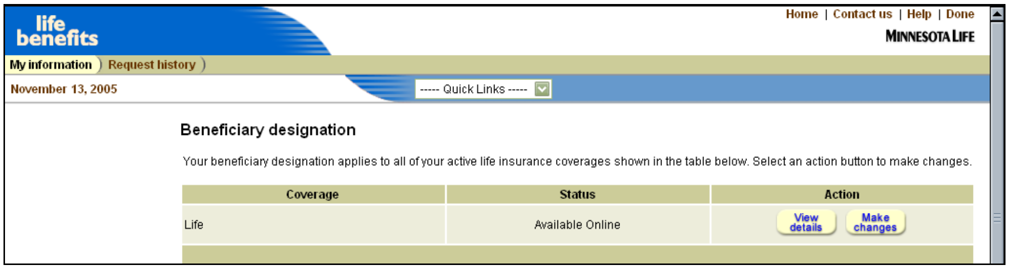
- Click the **University Code of Conduct** link to review the University Code of Conduct.
- The University Code of Conduct website will open in a separate browser window.
- After reading the Code of Conduct, click the **Submit** button from the NESSIE New Hire Code of Conduct form.

State Life Beneficiary Enrollment Form

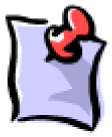
The State Life Beneficiary Enrollment Form will allow you to select a beneficiary for your life insurance.



- Click the **Continue** button. This will take you to the Beneficiary Designation area of the Minnesota Mutual Life Insurance Company.



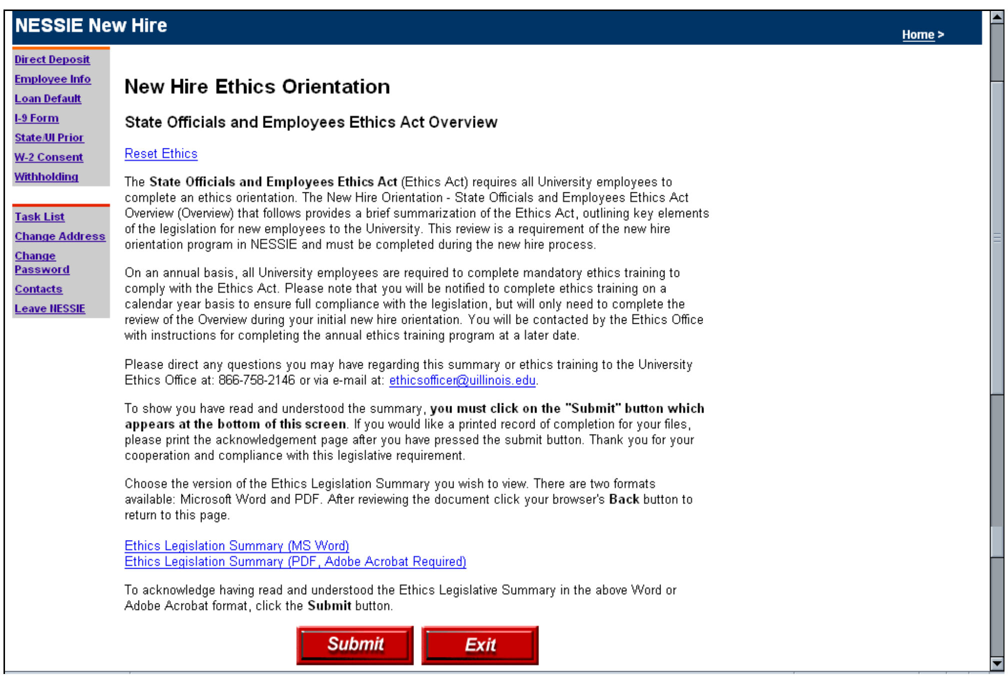
- From the Beneficiary designation form, click the **Make Changes** button to add your beneficiary.



NOTE: No status or date will be recorded on the Task List for this form.

Ethics Orientation Form

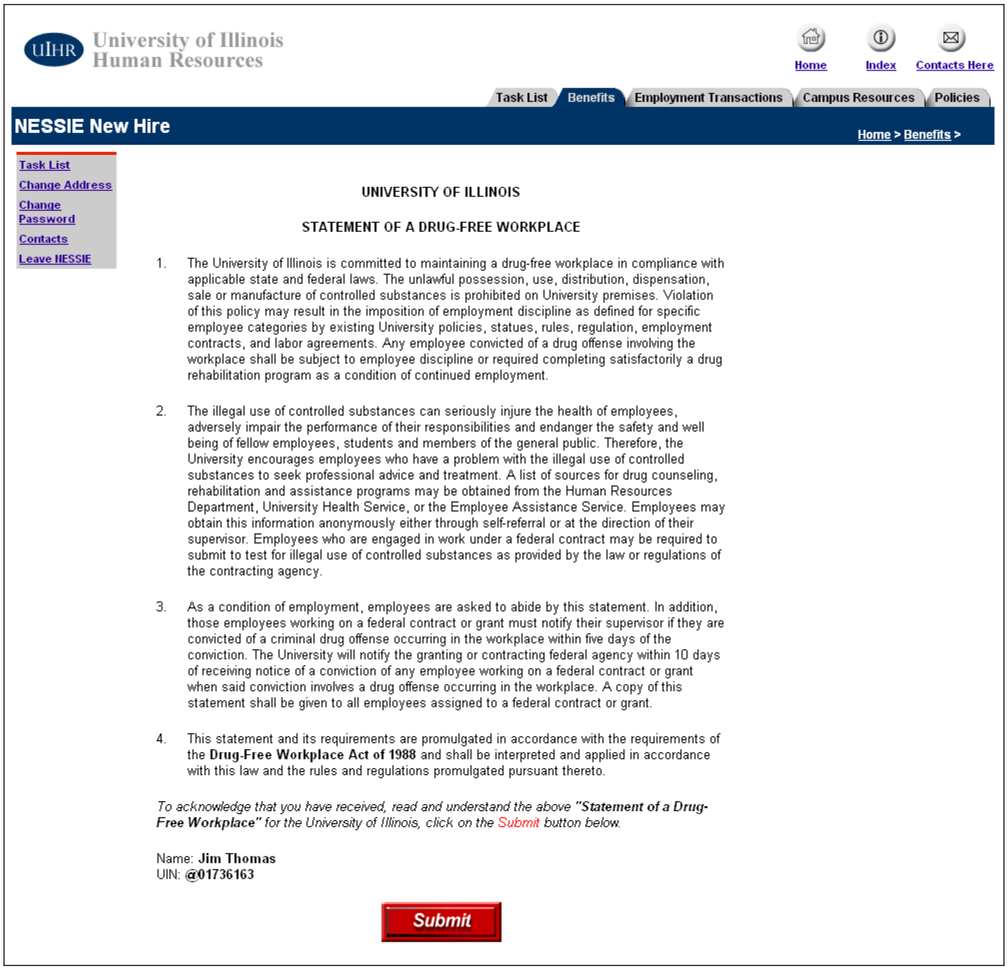
The **State Officials and Employees Ethics Act** (Ethics Act) requires all University employees to complete an ethics orientation. The New Hire Orientation - State Officials and Employees Ethics Act Overview (Overview) that follows provides a brief summarization of the Ethics Act, outlining key elements of the legislation for new employees to the University. This review is a requirement of the new hire orientation program in NESSIE and must be completed during the new hire process.



- Click one of the **Ethics Legislation Summary** links. A Word document or a PDF will open for you to review the Ethics Legislation Summary.
- After reading the Ethics Legislation Summary, go back to the New Hire Ethics Orientation form by clicking the **Back** button on your browser.
- Click the **Submit** button.

Drug-Free Workplace Form – UIC and UIS ONLY

All employees at the UIC and UIS campuses are required to read the Statement of a Drug-Free Workplace. This review is a requirement of the new hire orientation program in NESSIE and must be completed during the new hire process.



UIHR University of Illinois Human Resources

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NESSIE New Hire

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UNIVERSITY OF ILLINOIS

STATEMENT OF A DRUG-FREE WORKPLACE

1. The University of Illinois is committed to maintaining a drug-free workplace in compliance with applicable state and federal laws. The unlawful possession, use, distribution, dispensation, sale or manufacture of controlled substances is prohibited on University premises. Violation of this policy may result in the imposition of employment discipline as defined for specific employee categories by existing University policies, statues, rules, regulation, employment contracts, and labor agreements. Any employee convicted of a drug offense involving the workplace shall be subject to employee discipline or required completing satisfactorily a drug rehabilitation program as a condition of continued employment.

2. The illegal use of controlled substances can seriously injure the health of employees, adversely impair the performance of their responsibilities and endanger the safety and well being of fellow employees, students and members of the general public. Therefore, the University encourages employees who have a problem with the illegal use of controlled substances to seek professional advice and treatment. A list of sources for drug counseling, rehabilitation and assistance programs may be obtained from the Human Resources Department, University Health Service, or the Employee Assistance Service. Employees may obtain this information anonymously either through self-referral or at the direction of their supervisor. Employees who are engaged in work under a federal contract may be required to submit to test for illegal use of controlled substances as provided by the law or regulations of the contracting agency.

3. As a condition of employment, employees are asked to abide by this statement. In addition, those employees working on a federal contract or grant must notify their supervisor if they are convicted of a criminal drug offense occurring in the workplace within five days of the conviction. The University will notify the granting or contracting federal agency within 10 days of receiving notice of a conviction of any employee working on a federal contract or grant when said conviction involves a drug offense occurring in the workplace. A copy of this statement shall be given to all employees assigned to a federal contract or grant.

4. This statement and its requirements are promulgated in accordance with the requirements of the **Drug-Free Workplace Act of 1988** and shall be interpreted and applied in accordance with this law and the rules and regulations promulgated pursuant thereto.

*To acknowledge that you have received, read and understand the above **"Statement of a Drug-Free Workplace"** for the University of Illinois, click on the Submit button below.*

Name: **Jim Thomas**
UIN: **@01736163**

Submit

- Read the Drug-Free Workplace statement shown on this page.
- Click the **Submit** button to acknowledge your receipt and understanding of this message.

Frequently Asked Questions

The following are some frequently asked questions and solutions for the issues.

Password Information

Question	Answer
The new hire is not able to log into NESSIE New Hire with the ID and password given by their department. How can they get logged in?	For security purposes, new hires are required to change their new hire password after logging into NESSIE New Hire the first time. If they do not remember what they changed the password to, the department can reset the password through DART Search New Hire status or the campus HR Help Desk can reset the password. **HR Office Contacts:** **Chicago**: (312) 413-4848 or uichruohr@uillinois.edu **Springfield**: (217) 206-7015 or hric@uis.edu **Urbana-Champaign**: (217) 265-5620 or (866) 669-4772 or hric-urbana@uillinois.edu

New Hire Forms

Question	Answer
Why doesn't the search find the college the new hire is entering in the education section of the EIF?	The list of colleges is extensive but does not include all possible institutions. In addition, the name of the college might be listed in a different way than how the new hire might have entered it. Institution names are stored in Banner where they are abbreviated to save space. Because of this, it is best to do broad searches to find the institution.
How does a new hire enter their college information if it is not listed in the search results?	On the institution search results page, the new hire can choose Miscellaneous as their institution if they cannot find the one they are looking for. They can also contact the campus HR Help Desk and let them know the exact name of the institution, along with the city and country. The help desk can have the institution added to the institution list in Banner if it is a valid institution. **HR Office Contacts:** **Chicago**: (312) 413-4848 or uichruohr@uillinois.edu **Springfield**: (217) 206-7015 or hric@uis.edu **Urbana-Champaign**: (217) 265-5620 or (866) 669-4772 or hric-urbana@uillinois.edu

Question	Answer
What can a new hire do if they are trying to add a license or certification in the NESSIE New Hire EIF and cannot find the license or certification they are looking for?	Contact the Human Resources Help Desk at one of the numbers below. They will research the license or certification to make sure it is valid. If it is valid, they will add it to Banner so it will appear in NESSIE and NESSIE New Hire. Once it is added to Banner you will be able to search for it and add it to your records. **HR Office Contacts:** **Chicago**: (312) 413-4848 or uichruohr@uillinois.edu **Springfield**: (217) 206-7015 or hric@uis.edu **Urbana-Champaign**: (217) 265-5620 or (866) 669-4772 or hric-urbana@uillinois.edu
How can a new hire make a change to a new hire form after that form has already been submitted?	New hires will not be able to access submitted forms through NESSIE New Hire. If the form has been submitted, the new hire will need to log into regular NESSIE: http://nessie.uihr.uillinois.edu and make the change there. They will be able to access forms in NESSIE by using the NetID and password.

General

Question	Answer
How much time do new hires have to complete the new hire forms?	New Hires have 60 days after their hire date on the logon to access their new hire logon. The logon will remain in the system for 75 days after the hire date. At that point, the logon will be purged and the new hire will no longer be able to access the logon. If the logon has been purged, there is no way to retrieve it. Departments will need to create a new logon for the new hire if the original logon is purged. If you have any questions regarding this, please contact your campus HR Help Desk at one of the following: **HR Office Contacts:** **Chicago**: (312) 413-4848 or uichruohr@uillinois.edu **Springfield**: (217) 206-7015 or hric@uis.edu **Urbana-Champaign**: (217) 265-5620 or (866) 669-4772 or hric-urbana@uillinois.edu

Error Messages

Question	Answer
New hire receives the following error when trying to submit the Employee Information Form: Unexpected Error An error has occurred. We suggest you click on the "Exit" button below to return to the login page. If you continue to receive this message after logging in please contact your Human Resources office at the number listed below or send email to nessie@uillinois.edu <mailto:nessie@uillinois.edu> to report this problem. Message: Unknown exception occurred building object edu.uillinois.aits.enterprisemessaging.jmsobjects.WorkHistory from an XML String. Exception: Error on line 1: Illegal XML character: Detail: What is causing this error and how can it be resolved?	The XML error message is generated when a special character is entered in the record (usually the Work History Record) that the system doesn't like (such as bullets or tildes). These special characters can also be generated if you copied and pasted into the record. The message will have the words "Invalid XML Character" or "XmlEnterpriseObjectException" in it. If the new hire receives this error, they will need to contact the campus HR Help Desk and email them the error message in order to have the record deleted. Once the record has been deleted by HR, the new hire will be able to go back in and re-add the record without special characters. The new hire will not be able to access the section again until HR has deleted the record. **HR Office Contacts:** **Chicago**: (312) 413-4848 or uichruohr@uillinois.edu **Springfield**: (217) 206-7015 or hric@uis.edu **Urbana-Champaign**: (217) 265-5620 or (866) 669-4772 or hric-urbana@uillinois.edu
What causes the error "Message is array index out of range: 0" or "The request has exceeded the allowable time limit Tag: cfoutput" on the EIF and what can I do about it?	The Error message: "Message is array index out of range: 0" is caused when a college education record is added but no degree information is added. If a new hire encounters this error, they can go back into the education section on the EIF and either add a degree record to the record that is missing it, or remove the entire college record. Then, they should be able to continue and submit without a problem.

<<INSERT TROUBLESHOOTING NOTES IN THIS TEXT BOX>>

Question	Answer
New hire is receiving the following error message when trying to submit an education record in NESSIE: Degree list size before adding degree = 0 Unexpected Error An error has occurred. We suggest you click on the "Exit" button below to return to the login page. If you continue to receive this message after logging in please contact your Human Resources office at the number or email below to report this problem. Chicago: (312) 413-4848 uichrnessie@uillinois.edu Springfield: (217) 206-7015 hric@uis.edu Urbana-Champaign: (217) 265-5620 or (866) 669-4772 hric-urbana@uillinois.edu Message: Error processing the create request for object edu.uillinois.aits.enterprisemessaging.jmsobjects.Education Exception: Unknown exception processing Create request. Exception: An error occurred processing the Create request Error [0] Number: -1 Error [0] Description: ORA-00001: unique constraint (SATURN.PK_SORPCOL) violated. The bad field is before educ insert Detail:	This error indicates that the education record the new hire is trying to enter or update has been marked as an official transcript by the Admissions and Records Office. HR is not authorized to "unmark" the record. They will be able to contact the Admissions Office at the campus where the new hire applied for admission to get the education record updated or unmarked. Once the record is unmarked, the new hire can update it. UIC Admissions: Fabiene Whittier brankev@uic.edu UIUC Undergraduate Admissions: Nancy Herpstreith nherpstr@uiuc.edu UIUC Graduate Admissions: Pam Santic psantic@uiuc.edu For UIS, please contact Undergraduate or Graduate Admissions.
New hire received the following error while trying to submit my publication record on the EIF: Unknown Error occurred producing the Query request. Exception Publication Query response document is not valid! Exception: Error on line 1: Character conversion Malformed UTF-8 char -- is an XML encoding declaration missing? Line number below	This error indicates that there are special characters (such as bullets or accent marks) in a publication record on the new hire EIF. To correct this error, contact the campus HR Help Desk at one of the following numbers or by email to have the special characters removed or to have the record removed: **HR Office Contacts:** **Chicago**: (312) 413-4848 or uichruohr@uillinois.edu **Springfield**: (217) 206-7015 or hric@uis.edu **Urbana-Champaign**: (217) 265-5620 or (866) 669-4772 or hric-urbana@uillinois.edu