Payment of Work Hours to Students Without a Contract

This form is used for the payment of hours worked by student assistants or student study advisers/academic advisers who only work a few hours (on average 3 hours per week, but at a maximum of 12 hours per month) for at short-term period (a maximum of 1 month). For tasks exceeding a one-month period and/or tasks requiring more than 3 hours per week, then the person must be hired, and their work hours paid through TimeSheet.

In this case, please fill in the form: 'Request for Student Assistant Hiring Form' (Danish: A*nmodning om ansættelse af studentermedhjælp).*

Name:	
Cpr.-no.:	
TIN-no.:	
Department/section:	

Select the appropriate box:

SUL (used when working in connection with research, teaching, or assignments related to other students)

Student study advisers/academic advisers

If a medical student, please tick this box.

Week	Number of hours	Date	Description of assignment
Total hours			

Underkonto									
Artskonto	1	8	1	1	8				
Omk.sted									
Formål									
Projekt									
Analysenr.									
Omk.sted 2									

_____
Signature, employee

_____
Signature, department/section

Blanketten sendes til: dtap-loen@sdu.dk
Blanketten skal indeholde underskrift fra medarbejder og institut inden den sendes til Løn.

Personal Data Form for Employment as Student Study Adviser/Academic Adviser

To receive the correct salary and pension contribution, please complete and sign this form in connection with your employment at SDU. It is important that you consider each field/box before returning the form.

Personal data

Name:	Cpr.-no.:
Private address:	TIN-no.:
Postal code and city:	Tel.:
The salary will be directed to your NEM account	

Primary tax card	Secondary tax card

Current/completed programmes(s)

For the purpose of your salary classification – please include your exam transcript with ECTS points passed.

Name of education programme	Period

Have you previously had an employer-paid pension scheme? *If yes, remember to attach a pension statement from your pension company.*	NO YES

If a medical student, please tick the box

Date	Signature