

www.saic.edu/faculty



SAIC School of the Art Institute of Chicago

The Art Institute, including the school and the museum, is committed to ensuring employment decisions are based on an individual's abilities and qualifications. The Art Institute does not tolerate unlawful discrimination based on race, color, sex, religion, national origin, disability, age, pregnancy, actual or perceived sexual orientation, genetic information, gender-related identity, military or former military status, or any other status protected by federal, state or local law, in its programs and activities, public accommodations, or employment practices.



As a faculty member of the School of the Art Institute of Chicago, the following Art Institute of Chicago employee benefits are available to you:

- Free admission to The Art Institute and its paid lectures for you and your immediate family.
- Free general admission to the following:
 - The Field Museum of Natural History
 - o The John G. Shedd Aquarium
 - o The Adler Planetarium
 - Brookfield Zoo
 - o The Chicago Historical Society
 - o The Museum of Science and Industry
 - o The Chicago Academy of Sciences
 - o The DuSable Museum of African American History
- Discounts:
 - o The Museum Shop 25%
 - The Museum Cafeteria 10%

Background Check

Your employment offer is contingent upon security clearance through a criminal background check. To perform this check, your authorization is required. If, however, you decline to give authorization, your employment offer will be rescinded. Having a criminal conviction does not necessarily disqualify you for the employment. Each situation is examined on a case-by-case basis. To complete the background check, the Art Institute/SAIC uses a computer-based system that connects with criminal databases. Your ARTICard I.D. badge can be issued after the background check and all other necessary paperwork and documents have been completed.



The School of the Art Institute of Chicago Faculty Employment Resources

To: New Hire SAIC Faculty

From: Faculty Employment Resources

Re: Faculty Academic Records

The School of the Art Institute of Chicago (SAIC) requires official academic records of your postsecondary (baccalaureate, master's, doctoral, etc.) degrees and professional certifications as a precondition of your initial faculty appointment. *

For degrees not issued by SAIC:

Please secure official records (i.e., official transcript) of each of your **(non-SAIC)** postsecondary degree granting institutions and have them sent directly to:

The School of the Art Institute of Chicago Office of Faculty Employment Resources Attn: Faculty Records 37 S. Wabash Ave, Suite 819 Chicago, IL 60603

Electronic Submission may be sent to: saic-fer@saic.edu

For SAIC degrees:

□ I authorize SAIC to secure official records (i.e., official transcript) of my SAIC degree(s) from the SAIC Office of Registration and Records. If you do not authorize release of your SAIC certification, please visit http://www.saic.edu/academics/registrationandrecords/records/transcriptrequests/ and have your forms sent to the address above.

Last Name:
First Name:
SAIC Student ID#:
Year of Post Baccalaureate Certificate:
Year of Other SAIC Certificate:
Year of Baccalaureate Degree:
Year of Master's Degree:
Signature/Date:

*Higher Learning Commission Criteria for Accreditation And Assumed Practices B.2: Qualified faculty members are identified primarily by credentials, but other factors, including but not limited to equivalent experience, may be considered in addition to the degrees earned by the institution in determining whether a faculty member is qualified. Instructors (excluding for this requirement teaching assistants enrolled in a graduate program and supervised by faculty) possess an academic degree relevant to what they are teaching and at least one level above the level at which they teach, except in programs for terminal degrees or when equivalent experience is established. In terminal degree programs, faculty members possess the same level of degree. When faculty members are employed based on equivalent experience, the institution defines a minimum threshold of experience and an evaluation process that is used in the appointment process. hlcommission.org/policy/updates/AdoptedPoliciesAssumedPractices_2015_06_POL.pdf



New Hire Self-Identification of Race/Ethnicity and Sex

INSTRUCTIONS PLEASE READ ALL INSTRUCTIONS CAREFULLY BEFORE COMPLETING FORM

Anti-Discrimination Notice: It is an unlawful employment practice for an employer to fail or refuse to hire or discharge any individual, or otherwise to discriminate against any individual with respect to that individual's terms and conditions of employment, because of such individual's race, color, religion, sex, or national origin.

The Art Institute of Chicago is subject to certain governmental recordkeeping and reporting requirements for the administration of civil rights laws and regulations. In order to comply with these laws, we invite employees to voluntarily self-identify their sex, race and ethnicity.

Although we are asking you to complete this survey to assist us in complying with federal reporting requirements, doing so is completely voluntary. You will suffer no adverse consequences if you do not provide this information. The information will be kept confidential and will be used only in accordance with applicable law, executive orders, and regulations, including those that require us to summarize and report the information we collect to the federal government.

SEX IDENTIFICATION The categories listed below are the only options available for federal reporting purposes.
☐ Female ☐ Male
RACE/ETHNICITY IDENTIFICATION The categories listed below are the only options available for federal reporting purposes.
1. Do you consider yourself to be Hispanic/Latinx? (A person of Cuban, Mexican, Puerto Rican, South or Central American descent, or other Spanish culture or origin, regardless of race.)
□ Yes □ No
If you answered "Yes" you have completed this form. If you answered "No" please select a race from the options below.
2. Select one or more of the following racial categories to describe yourself:
American Indian or Alaska Native (Not Hispanic or Latinx): a person having origins in any of the original peoples of North and South America (including Central America), and who maintains tribal affiliation or community attachment.
Asian (Not Hispanic or Latinx): a person having origins in any of the original peoples of the Far East, Southeast Asia, or the Indian subcontinent, including, for example, Cambodia, China, India, Japan, Korea, Malaysia, Pakistan, the Philippine Islands, Thailand, and Vietnam.
Black or African American (Not Hispanic or Latinx): a person having origins in any of the black racial groups of Africa
Native Hawaiian or Other Pacific Islander (Not Hispanic or Latinx): a person having origins in any of the original peoples of Hawaii, Guam, Samoa, or other Pacific Islands.
White (Not Hispanic or Latinx): A person having origins in any of the original peoples of Europe, the Middle East, or North Africa.
Print Name:
Signatura



Acknowledgment of The School of the Art Institute of Chicago's Policies

With my signature below, I acknowledge that I have been made aware of the availability of the School Art Institute of Chicago's policies, including but not limited to the Faculty Handbook, Handbook-Supplement, Legal Supplement, and policies located on the School's web site: http://www.saic.edu/faculty/

I acknowledge that I am expected to read and familiarize myself with the contents of these policies, including but not limited to the Faculty Handbook, Handbook-Supplement, Legal Supplement, and other policies which contain, among other things, important information on the School of the Art Institute's policies concerning intellectual property, consensual faculty/student relationships, prohibition of discrimination, harassment and retaliation, and maintaining a workplace free from the effects of drug and alcohol use or abuse.

Faculty Member's Name		
Faculty Member's I.D. Number		
Faculty Member's Signature	Date	



Notice of Workers' Compensation Preferred Provider Program (PPP)

This information is being provided as an explanation of your rights and responsibilities should you have a work-related injury.

Illinois law allows an employer to offer healthcare services to an employee with a workers' compensation injury through an approved Preferred Provider Program (PPP). The Illinois Department of Insurance requires the PPP network to meet standards for geographic accessibility, adequacy of medical providers, and other factors important to assure the adequacy of medical care to an injured employee. You may choose to be treated by a medical provider in the PPP network subject to the limitations described below. To access the list of medical providers, visit www.aig.com/intellirisk. Select "Find Nearby Medical Care" and then search by "Address" or "Name." Complete the necessary information and click "Continue."

After report of injury to us, you may in writing decline your participation in the PPP. Should you decline participation in the PPP, the law provides that your declination of participation constitutes one of the two choices of medical providers to which you are otherwise entitled to. You may also decline treatment from the PPP at any time throughout your treatment for this work-related injury. However, that declination will also constitute one of your two choices of medical providers, unless the Illinois Workers' Compensation Commission determines that the medical treatment provided to you by the PPP medical provider is inadequate. In addition, the law provides if, prior to report of an injury, you are provided non-emergency treatment from a medical provider not within the PPP, that treatment would constitute one of the two choices of a medical provider to which you are otherwise entitled to. Please be advised that our company may not be required to pay for medical treatment you receive from medical providers outside, or beyond your two choices of medical providers and subsequent referrals.

If you are injured on the job...IN CASE
OF EMERGENCY SEEK IMMEDIATE
MEDICAL ATTENTION AT THE NEAREST
EMERGENCY FACILITY. Otherwise,
immediately report your injury to your
supervisor or manager.

If the PPP does not have a medical provider who can provide an approved medical treatment, a medical provider not in the PPP, may be used at our expense if you have complied with our PPP's pre-authorization requirements for use of the medical provider who is not a member of the PPP.

For questions related to PPP coverage, contact AIG Medical Management Services at 312-930-2195, or by email at ilppp@aig.com.

