

Authorization to Hire
or Change Notice

Name: _____		Student ID# _____
Student's Email Address: _____		
Position Title: _____		
Hiring Department: _____	Campus Location: _____	
Supervisor: _____	Ext: _____	
Wage Rate _____	Hire/Eff Date: _____	
Account #(s) _____ %		
_____ %		
Supervisor/Budget Authority Signature: _____		Date: _____

Status:

New Employee **Employee Change**

Transfer

From Dept _____ To _____

Date eff From _____ To _____

Continuing student worker

Student employment – Supervisor:

Fax this form to Human Resources (Administration 016) at ext. 3505 **before** student begins working. Eligibility for student employment must first be established. Once eligibility is confirmed you may send student to Human Resources to complete employment paperwork.

Federal Work Study – As of this date the above-named student is eligible to receive the following award (s):

FWS Award Summer \$ _____ Fall \$ _____ Spring \$ _____

FWS Coordinator Signature: _____ **Date approved:** _____

Supervisor: Send this form to the Financial Aid Office (2nd floor, University Center) or fax to 3435 **before** student begins working. Eligibility for federal work-study must first be authorized. Once authorized form will be forwarded to Human Resources. **My signature indicates that I will comply with the conditions of the student's award. This authorization is not final until this form is completed and submitted to the Office of Financial Aid.**

Supervisor Signature: _____ **Date:** _____