



STUDENT HOURLY REQUEST FORM

Please have this form filled out and signed by Department Administrator prior to interviewing for the position.

Today's date: _____ New Position Replacement

Position needed to hire for: _____

Date to fill position by: _____

Date position would end: _____

How many hours per week? _____

Requested wage: _____

Funding source: _____

Please list in detail a description of duties:

Printed name of supervisor: _____

Phone number of supervisor: _____

Email of supervisor: _____

Printed name of Alternate approver: _____

Email of Alternate approver: _____

Department Manager approval: _____ Date: _____