



Presbyterian College
Office of Financial Aid

2018-2019
Student Employment
Request for Hire & Authorization Form

****New and returning students should NOT begin work until the student and supervisor have received an email of job approval and information for time clock. All student workers must submit appropriate documentation as required by Federal Laws and they must be cleared through the E-verify process before working****

Section 1: To be Completed by Student

Student Name: _____ ID: _____

PC Email: _____ Box #: _____ Cell#: _____

1. Are you currently employed with another department on or off campus? **YES** **NO**
If yes, which department and how many hours will you work for this department? _____
2. Do you want to continue to work with this department as well? **YES** **NO**

Section 2: Request for Hire – To be completed by Hiring Department

Department Name:	Org #:	*Rate of Pay:
Supervisor Name:	Position:	Start Date:
Supervisor Email:	Requested Hrs per week:	End Date:
*On-campus Rate of Pay is \$7.25 (unless approved by the Financial Aid Office in advance). Off-Campus Rate of Pay is \$8.50		

Section 3: Signatures

Signing below affirms that both parties will:

- Notify the Financial Aid Office immediately if any changes to employment are made.
- Ensure that the student will **NOT** begin work until after the student is cleared through E-Verify, and they have received an email from the work study coordinator.
- Monitor the student's work-study allotment (as indicated above by Financial Aid) each time period, so it will not be exceeded.
- Submit completed and signed timesheets, or approve time clock by the 15th of each month.

Student's Signature _____
Date

Supervisor's Signature _____
Date

Section 4: Financial Aid Office Approval

Eligible for hire: Yes No Reason:			
Total Year Amt:	Fall Award Amt:	Spring Award Amt:	Summer Award Amt:
____ Federal	____ Institutional	____ Other	Approved Rate of Pay: _____
Comments:			Approved Hours Per Week: _____
Financial Aid Office Approval:		Date: _____	

Office Use Only:
WSA ____ I-9 ____ W-4 ____ E-verify Completed ____ RPAAWRD ____ Banner ____ Direct Deposit ____

Processed By: _____ Date: _____