



2017-2018 Change of Job Form

September 3, 2019 – May 8, 2020

(* Dates exclude working during breaks such as Thanksgiving, Christmas, spring break and summer.
Special permission is required if a student is needed during a break.)

Student Name: _____ Fisher ID: _____

Current Supervisor's Name (*please print*): _____

Department: _____ Cost Center: _____

Position: _____ Hours per wk: _____ Pay Rate: _____

Reason for Change:

Current Supervisor Signature: _____ Date: _____

.....
New Supervisor's Name (*please print*): _____

Department: _____ Cost Center: _____

Phone Number: _____ Email: _____

Position: _____ Hours per wk: _____ Pay Rate: _____

New Supervisor Signature: _____ Date: _____

Student Signature _____ Date: _____

.....
Financial Aid Signature: _____ Date: _____

☐ Federal Work Study 40

2019-2020 Work-Study Award Amount Remaining \$ _____

Students are required to be dependable, punctual, and perform duties to the best of their abilities. Supervisors will provide the appropriate direction and supervision of work preformed.

Please keep in mind that no student will be compensated for working more than the allotted hours listed below unless previously approved. In order for students to be paid in a timely manner, timesheets must be approved no later than 9:00 a.m. on Monday morning following the end of a pay period. **Supervisors and students must jointly plan and monitor the student's weekly work hours, ensuring that all work has been scheduled appropriately so that all earnings can be reached but not exceeded.**

THIS COMPLETED FORM MUST BE RETURNED TO THE OFFICE OF FINANCIAL AID.