



2019-2020 Student Employment Contract

September 03, 2019 – May 8, 2020

STEP 1: To be completed by the STUDENT

Student Name (please print): _____ Fisher ID: _____

Personal E-Mail: _____ ☐ New to the work study program
☐ Returning to the work study program

Student Signature: _____ Date: _____

This form serves as a contract to the job listed below. Students are required to obtain authorization from the Office of Financial Aid AND the Payroll Office prior to working on campus. **Therefore, before a student can begin working, they must present their supervisor with this form, complete with approvals and signatures from BOTH the Office of Financial Aid and the Payroll Office, otherwise the student is not eligible to work on campus.**

STEP 2: To be completed by the SUPERVISOR

Hiring Department: _____ Dept. Code (required): _____

Will your student need IT access in their position? If 'yes' please complete the attached form. ☐ Yes ☐ No

Student Position: _____

Hiring Supervisor's Name (please print): _____

Supervisor Signature: _____ Date: _____

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 performed. Please keep in mind that no student will be compensated for working more than the allotted hours listed below unless previously approved. **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. Timecards must be approved before noon on Monday.**

* If more than one position is obtained, hours combined for both jobs must be monitored so allocation of hours is not exceeded.

STEP 3: To be completed by PAYROLL

Payroll Signature: _____ Date: _____

- ☐ I-9 Completed
- ☐ W-4
- ☐ M-4
- ☐ Direct Deposit Form

Please see Mrs. Debra Kamm-Pelles in the Payroll Office located at 116 Beacon Street, 1st Floor.
Office Hours:
Monday -Thursday: 9am - 3pm
Friday: 9am - 11am

STEP 4: To be completed by FINANCIAL AID

Financial Aid Counselor's Signature: _____ Date: _____

Rate of Pay: ☐ \$12 per hour ☐ \$ _____ per hour approved by _____

Approved for: ☐ 20 hours per week ☐ _____ hours per week approved by _____

☐ Federal Work Study Award \$ _____

Please complete Steps 1-3 and bring this form in-person to the Office of Financial Aid, located on the 3rd Floor of One Arlington Street.
A copy of this completed form must be presented to the hiring supervisor PRIOR to beginning work.