GENERAL INFORMATION

Dept Name: ____________________________________________
Contact Person: ___________________________ Ext: __________ Email: ______________
Budget to be charged (REQUIRED): ______________ - 45000 - 5720 - 98

FOR OFFICE USE ONLY

Job Title: ____________________________________________
Job # V: ___________________________

JOB DESCRIPTION

Begin and End Dates: __________________________________
Duties: ______________________________________________

PAYMENT INFORMATION

Hourly Position (Y/N): ________  Recommended Hourly Rate: $ _________________
(If you are unsure of the hourly rate, you may check with Student Employment to determine this. The hourly rate will be based on the job description and current payscale)
One-time pay (Y/N): _______
If yes, amount: $ ________________  If no, estimate total amount to be given to student: $ _________________

Note: You may not employ a student until you receive confirmation from Student Employment that the student is eligible to work. Receipt of the Student Employment Status Change Form (SESCF) or Time Sheet confirms eligibility.

Student Name: ____________________________  Vassar ID #: __ __ __ - __ __ __ - __ __ __

AUTHORIZED OF HIRE INFORMATION

Name (Print & Sign): ____________________________________________  Date: __ / __ / __