**GENERAL INFORMATION**

Dept Name: __________________________________________________________________________________________

Contact Person: ____________________________ Ext: ___________ Email: ____________________________

Budget to be charged (REQUIRED): ______________ - ______________ - 5746 - ______________

(Fund) (Org Number) (Program)

**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 #: ________ - ________ - ________

**AUTHORIZATION OF HIRE INFORMATION**

Name (Print & Sign): ____________________________  Date: __ / __ / ___