

Request for Hire/Work Authorization Form
 Student Employment Program, Wheaton College, Norton, MA 02766

PART I – STUDENT EMPLOYEE SECTION

Wheaton ID	Last Name	First Name	MI	Class Yr.
Wheaton Box	Local Tel.	E-mail Address		Local Address/Dorm.
Is this your first job on campus?		Yes___ No___	If yes, I9 and W4 forms are required to be completed in SFS immediately.	
Do you hold another job on campus?		Yes___ No___	If yes, in which dept.? _____	
I agree to the conditions of employment and accept the position indicated below contingent upon verification of employment eligibility. I understand that I am not eligible to begin working until my start date has been approved by the Office of Student Financial Services.				
Student's Signature			Date	

PART II – SUPERVISOR'S REQUEST FOR HIRE (Please complete all information.)

If you are satisfied that this student can perform the job as you require, complete the section below and return it to the Office of Student Financial Services. Total student earnings from all positions held may not exceed the work award.

DEPT. ORG#: _____ ACAD. YR.: _____

NEW HIRE: _____ FALL ONLY: _____

REHIRE: _____ SPRING ONLY: _____

PROMOTION: _____ JANUARY/SUMMER: _____ (Please circle)

ANTICIPATED ACADEMIC YEAR EARNINGS: _____ JANUARY/SUMMER PAY RATE: _____

HOURS/WEEK: _____

Requested Start Date: _____ Please note: The actual authorized start date will be established by the Office of Student Financial Services based on award and employment eligibility. The student is not eligible to work before approval from SFS has been received.

POSITION CODE: _____ POSITION TITLE: _____

POSITION DESCRIPTION: _____

DEPARTMENT/AGENCY NAME	LOCATION	TELEPHONE#
PRINT SUPERVISORS NAME	TITLE	
SUPERVISOR'S SIGNATURE	TITLE	DATE

PART III –WORK AUTHORIZATION (STUDENT FINANCIAL SERVICES USE ONLY)

FWS _____	WIWS _____	W-4 DATE _____	I-9 _____
WW _____	HALLST _____	#SIT _____	#FED _____
CS ON CAMPUS _____		OTHER _____	
CS OFF CAMPUS _____		DIRECT DEPOSIT _____	
DEPT. ORG.# _____	A.Y.WK. AWARD \$ _____	PAY RATE \$ _____	MAX. HRS./WK. _____
POS. CODE _____	SUFFIX# _____	AUTHORIZED AMOUNT \$ _____	
TOTAL JOBS HELD: (1) _____ (2) _____ (3) _____ (4) _____			
RJASEAR _____	PEAEMPL _____	NBAJOBS _____	PDABDSU _____
PPAIDEN _____			
Processed By _____	Date Entered on System _____	<u>Student's Authorized Start Date</u>	
Student Employment Authorized Signature _____	Title _____	Date _____	