



PAYROLL OFFICE

Student Employment Summer Roster Request Form

Please be sure to complete all applicable information

INSTRUCTIONS:

Summer: 2012

Complete a *separate form* for each unique job title. Refer to the Student Employment Handbook for additional information.

Student Job Supervisor: _____ Box#: _____

Student Job Title: _____ Payroll Only _____

Department Name: _____ - 6160

Summer is May 6 through Aug. 25

Wage Org/Acct

Student Name	ID#	Living On or Off Campus?	Job Level	Start Date <i>if not the start of the summer</i>	End Date <i>if not the end of the summer</i>	Hours per Week	Comments
1.		<input type="checkbox"/> On <input type="checkbox"/> Off					
2.		<input type="checkbox"/> On <input type="checkbox"/> Off					
3.		<input type="checkbox"/> On <input type="checkbox"/> Off					
4.		<input type="checkbox"/> On <input type="checkbox"/> Off					
5.		<input type="checkbox"/> On <input type="checkbox"/> Off					
6.		<input type="checkbox"/> On <input type="checkbox"/> Off					
7.		<input type="checkbox"/> On <input type="checkbox"/> Off					
8.		<input type="checkbox"/> On <input type="checkbox"/> Off					
9.		<input type="checkbox"/> On <input type="checkbox"/> Off					
10.		<input type="checkbox"/> On <input type="checkbox"/> Off					
11.		<input type="checkbox"/> On <input type="checkbox"/> Off					
12.		<input type="checkbox"/> On <input type="checkbox"/> Off					

Student Job Supervisor _____

Budget Director _____

Print Name

Signature

Date