



Request for Temporary Student Worker / Peer Tutor / Intern

Requested Position _____

Requesting Supervisor _____ Request Date _____

Department _____ Start Date _____

of Requested Hrs/Week _____ Period of Services _____ to _____

Hourly Rate \$ _____ Total Estimated Amt \$ _____

Reason For Need

Description of Duties

Selected Applicant Name _____

Student ID: _____

Employee Signature _____

Supervisor Signature _____

Budget Unit Head Signature _____

VC Signature _____