REQUEST FOR STUDENT EMPLOYEE(S) UNDER THE FEDERAL COLLEGE WORK-STUDY PROGRAM
SUMMER 2017

One of these forms should be completed for each type of job available.

Employer Department: ____________________________ Position Location: ____________________________ Phone: ________________________________

SUMMER REQUEST – MAY 15, 2017 – AUGUST 27, 2017

Job Title: ____________________________________________________________________________

Job Description: ____________________________________________________________________________

Job Requirements: ____________________________________________________________________________

Position Justification: ____________________________________________________________________________

Is this position an extramurally funded project? Yes _____ No ______

If yes, project title: ____________________________________________________________________________ Number: ________________________________

BUDGET INFORMATION

<table>
<thead>
<tr>
<th>Number of Students¹</th>
<th>Weekly Hours Per Student²</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
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</tbody>
</table>

<table>
<thead>
<tr>
<th>Weekly Hour Total³</th>
<th>Wage Rate⁴</th>
</tr>
</thead>
<tbody>
<tr>
<td>0</td>
<td>$9.75</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Number of Weeks⁵</th>
<th>Requested Allocation</th>
</tr>
</thead>
<tbody>
<tr>
<td>15</td>
<td>$0.00</td>
</tr>
</tbody>
</table>

Approved Allocation: APPROVED ALLOCATION IS A REQUIRED FIELD

Note: The approved allocation can be determined by President, Vice President, Department Chair, or Director, and must be entered prior to submission to the Financial Aid Office

SUPERVISOR INFORMATION

Supervisor: ____________________________ Title: ____________________________

Office: ____________________________ Phone: ____________________________

Fax: ____________________________ E-mail: ____________________________

113 Bray Hall  •  1 Forestry Drive  •  Syracuse, NY 13210  •  Phone: 315-470-6670  •  Fax: 315-470-4734  •  e-mail: finaid@esf.edu

www.esf.edu
CONTACT INFORMATION

The contact information listed above will be included in posted job descriptions unless checked below. Please check the boxes for any information that should **NOT** be included.

☐ No Phone Number    ☐ No Fax Number    ☐ No E-Mail Address

PROCEDURES

### APPROPRIATE ACTION

☑ Request for Federal Work-Study Student Employee forms delivered to faculty and staff.

☐ [ALL DIVISIONS] Faculty and staff complete requests for the summer and academic year periods, and forward to Faculty Chairperson/Director

☐ [ACADEMIC AFFAIRS ONLY] Provost provides Work-Study Allocations and allocation summary sheets to unit.

☐ [DIVISIONS OTHER THAN ACADEMIC AFFAIRS] Director reviews all requests, endorses valid requests, and forwards to appropriate supervisor (in most cases, President/Vice President).

☐ [DIVISIONS OTHER THAN ACADEMIC AFFAIRS] President/Vice Presidents review requests, determine allocation amount for each department/area, and return approved forms to department chairs/directors.

☐ [ACADEMIC AFFAIRS ONLY] Unit Heads allocate available funds, and complete and submit allocation summary sheet to Provost.

☐ [DIVISIONS OTHER THAN ACADEMIC AFFAIRS] Directors allocate available funds to each position in their area, notify the requesting individuals of that allocation, and then forward approved forms to the Financial Aid Office for tracking and posting.

☐ [ACADEMIC AFFAIRS ONLY] Provost approves unit summaries; unit heads notify requesting individuals of their allocation and forward approved forms to the Financial Aid Office.

### SIGNATURES

Position Supervisor: ___________________________ Date: ___________________________

Department Chair/Director: ___________________________ Date: ___________________________

President/Vice President: ___________________________ Date: ___________________________

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