

State Student Assistant Appointment Form

Upon Completion, return to Office of Human Resources, 216 Bray Hall

	plete: Required Inforn	Hatton
Student's Last Name:		Student's First Name:
		(Name student chooses to go by)
Student email:	email to complete online paperwork f	from "Hirezon/Interview Exchange"
Anticipated Weekly Hours	3:(25 hour lim	mit per week) https://www.esf.edu/business/documents/maxhours.xlsx
Appointment Start Date:	End Date:	(hours worked should not begin prior to start date or after end date)
Hourly Rate:	(\$14.20 minimum - \$25.87 ma	aximum)
Department/Unit:		Account # to be charged:
Brief Description of Duties:	:	
_	ore than 20 hours per week, or	certification is required. ood academic standing at SUNY ESF
Advise Student that a time recor.	d is required to be submitted biweekly	ly and accurate in order for payment to be processed. Payments are issued on an extra lag
	on time, the first payment will be pro	ocessed 16 business days after the end date of the first pay period worked. See schedules
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