

Undergraduate Student Employment Agreement Departmental Form for Hourly Employees

Section 1 - To	be complet	ed by Student I	mploye	e					
CWID	First Na	First Name				Last Name			
I am a (check all t	hat apply):								
New Mines Stu	dent Employ	ee 🔲 Work Si	tudy Rec	ipient 🗌					
Current/Previo	us Mines Sti	ıdent Employee	☐ Wo	orking/Plan to Work	Multiple On	ı-Campu	s Jobs [
across all ca student emp are submitte	mpus jobs loyee stated to or col mployees al	s. I understan us. I understa mpleted by th e <u>required</u> to col	d that I nd I an e MAP	Semesters) or up am ineligible for n not eligible to w S office*. ne new hire onboardi	unemploy ork until a	yment all emp	benefi loyme	ts based on my nt requirements	
Student Signature							Date		
Section 2 - To	be complet	ed by Employin	g Depar	tment					
Employing Department Cost Center			Busin	Business Title			Hours/Week FTE		
Description of I	Duties								
to End Employment Da				\$ Hourly Rate	paid froi	m	Worktag		
Г			1						
Supervisor Signature			Super	visor Name			Date		