CHABOT-LAS POSITAS COMMUNITY COLLEGE DISTRICT
Student Assistant Employment Requisition
For the 20_____ to 20_____ School Year

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1. **STUDENT APPLICANT INFORMATION (Type or print in ink, attach copy of Social Security card and student enrollment verification.)**

Last Name: _____ First Name: _____ Middle Initial: _____

(Please write name exactly as found on Social Security Card or other official document.)

SSN or W#: _____ Birth Date: _____ Contact Number: _____

Address: _____ City: _____ Zip: _____
[Residential or Mailing]

I am a ☐ Chabot ☐ Las Positas College student (currently enrolled/preregistered in _____ units for _____ semester, 20___).

ARE YOU CURRENTLY WORKING FOR ANOTHER DEPARTMENT/OFFICE? ☐ **YES** ☐ **NO**

Dept: _____ **Supervisor:** _____ **Assigned # of Hours:** _____

I have read the attached "Guidelines for Student Employment." I understand that my employment on campus is temporary and can be immediately terminated.

Student Signature: _____ **Date:** _____

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2. **TO BE COMPLETED BY HIRING DIVISION**

Employment is limited to eight (8) hours per day, twenty (20) hours per week during entire calendar year (in all combined areas of the college).

To be employed by: _____ Building: _____ Room: _____
Division/Area

Student's Direct Supervisor: _____ Extension: _____
Name and Position

Position Hired: Federal Work Study Student   Student Assistant   Student Intern/Ambassador   Hours Per Week: _____

RANGE/STEP: CATEGORY: A $14.00   B $14.50   C $15.00   [C requires Vice President or President's signature below.]
(Please see information on previous page for appropriate category and pay range.)

Funding Source(s): ☐ FWS ☐ CalWorks ☐ Division ☐ Other: _____

Budget Account Number: *(for FWS and HR use ONLY)*

FUND	ORGN	ACCT	PROG	%	Position Code	Suffix
_____	_____	_____	_____	%	_____	_____
_____	_____	_____	_____	%	_____	_____
_____	_____	_____	_____	%	_____	_____
_____	_____	_____	_____	%	_____	_____

☐ **New hire**: effective date: _____   ☐ **Rehire**: effective date: _____

☐ **Hiring Supervisor/Administrator has verified that student is enrolled in the appropriate number of units before hiring them as a Student Assistant or in FWS.**

Please Print Hiring Administrator's Name: _____

Hiring Administrator's Signature: _____ **Date:** _____

Vice President's Signature: _____ **Date:** _____
(Only to be signed by Vice President, if the C Range is applied.)

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3. **TO BE COMPLETED BY FINANCIAL AID OFFICE** (*For Federal Work Study Students Only*)

☐   Hired under Federal Work Study   Awarded $_____

Total hours_____   No. of units_____   Satisfactory Academic Progress   ☐ Yes   ☐ No

Approved by: _____   **Date:** _____
                                    <small>Financial Aid Officer</small>

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4. **TO BE COMPLETED BY THE CalWORKS COORDINATOR** (*For CalWORKS Students Only*)

Awarded $_____   Total hours_____   No. of units _____   Good Standing   ☐ Yes   ☐ No

Approved by: _____   **Date:** _____
                              <small>CalWORKS Coordinator</small>

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5. **TO BE COMPLETED BY ADMINISTRATOR, ADMISSION & RECORDS** (*For International Students*)

No. of units_____   Verification of approval to work: _____

Approved by: _____   **Date:** _____
                    <small>Administrator of Admission & Records</small>

6. **HUMAN RESOURCES:**

HR Manager Approval: _____   **Date:** _____

Input: _____   **Date:** _____