



UNIVERSITY of WASHINGTON | BOTHELL

STUDENT EMPLOYMENT FORM

SECTION 1 - COMPLETED BY STUDENT EMPLOYEE

Undergrad **Quarter:** Autumn Winter Spring Summer
Graduate **Number of Credits Enrolled:**

Are you currently employed elsewhere at UW? Yes No If yes, where?

Have you been awarded Work Study? Yes No If yes, submit Award Verification Form

Do you have a Social Security Number? Yes No Do not write Social Security Number here

If no SSN, you may not work until you have one; contact the Center for International Education at

Husky Hall Room 1212; 425-352-3876 or www.uwb.edu/cie

Citizenship: U.S. Permanent Resident If Foreign National, I-20/EAC expiry date:

Last Name:	First Name:	Middle Name:
Student Number:	UW NetID:	Phone Number:

By checking this box and printing my name, I certify the information above is accurate. As a UW student hourly employee, I understand that I am limited to working no more than 19.5 hours/week (or no more than 19 hours for Work Study) when classes are in session.

Date:



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SECTION 2 - COMPLETED BY SUPERVISOR OR HIRING OFFICIAL

If your employee will be paid an **hourly rate**, please complete the following:

Appointing Dept:	Cost Center (Budget):	Sup Org & Time and Absence Approver: (See
Start Date:	End Date:	Campus Box:
Hourly Rate:	Job Class Code:	Business Title:

If your student will be paid a **one-time payment** (fixed fee), please complete the following:

Student One-Time Payment Description of Work:	Service Period:
	Amount:

I understand that I must monitor my student hourly employee to ensure they do not work more than 19.5 hours/week (or no more than 19 hours for Work Study) when classes are in session.

Supervisor Name (please print):

By checking this box and printing my name, I certify the information above is accurate.

Date:

SECTION 3 - COMPLETED BY UWB WORKDAY SUPPORT TEAM (WST)

Date Received:		WST Initials and Date:	
Employee ID:		Position Number:	

Checklist: Welcome e-mail was sent to Student, Supervisor and I-9 Coordinator