



College Work-Study Employee Requisition
Fall 20__ Spring 20__ Summer 20__

Work-Study Position Title: Office Assistant
Department Requesting Position:
Campus: Room Number: Number of Work-Study Positions Requested:

Description of Duties and Tasks: Essential duties and responsibilities include the following. Other related duties may be assigned.
Respond to and/or direct inquiries in person or on the phone.
Maintain data entry or process any office documents.
Perform clerical duties in support of department.

Required Skills: Must possess required knowledge, skills, abilities and experience and be able to explain and demonstrate, with or without reasonable accommodations, that the essential functions of the job can be performed.
Ability to conform to an established work schedule.
Ability to communicate in a concise and effective manner.
Ability to understand and follow instructions.
Ability to use personal computers.
Effective interpersonal skills.
Ability to exercise tact and discretion.

What other possible duties will the student be required to perform? Please be specific with regard to any physical activities, including lifting, stair climbing, cleaning & maintaining facilities or equipment.

Note: Depending on the student's award, 15 hours per week is the maximum a student is allowed to work during the Fall/Spring. Summer eligibility may be as high as 20 hours per week, depending on the student's award.

Are you willing to train the work-study student? Yes [] No []

Will the student be required to work specific hours/days other than Monday-Friday 8 a.m.-5 p.m.? Yes [] No []

If the answer to the above question is yes, please indicate hours/days:

Are weekend and/or evening hours available for students to work? Yes [] No []

To whom should the student be referred for the interview?

Important! To request and hire a work-study student, you must meet the definition of supervisor as defined by Human Resources and the E-Time system!

(Supervisor's Name: Please Print)

(Supervisor's Title: Please Print)

(Supervisor's E-Mail Address)

(Supervisor's Signature)

(Phone Number)

(Date)