

Financial Assistance

Clark University

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Undergraduate Non Work-Study Work Authorization

Phone 793-7783

2011-2012

Fax 793-8802

Section I. To be completed by the **student**:

Student Name: _____ Clark ID#: _____

Box #: _____ Cell Phone #: _____

Student Signature

Date

Student signature above indicates student acknowledges s/he has read and understands the Student Employment Handbook.

SECTION II. To be completed by the **hiring supervisor**: Please complete all the information in this section, leaving nothing blank. Incomplete forms will be returned to the supervisor and may delay the student's paycheck.

Supervisor's Name

Extension #

By signing this form I agree to hire the above named student for the position of:
_____ in the _____ department.

Index # to be charged _____ ORG#: _____ Rate of pay _____

Approver _____ Proxy _____

The **Approver** is authorized to approve and submit electronic student timesheets. A **Proxy** is the individual(s) who is authorized to approve timesheets when the Approver is not available.

XXX To be paid from **NON WORK STUDY** account **6053**.

Authorized Supervisor Signature

Date

Section III. Additional student employment information: Students are authorized to work from August 29, 2011 to May 20, 2012, except graduating Seniors. **Last day for graduating seniors to work is April 30, 2012.**

Office of Budgets and Planning, if applicable

Date