

Central Business Services Office

SOJC Student Employment Sign-Off Form

A position description is required for each new hire.

☐ New Hire ☐ Change (Reason) _____

Supervisor's Section

Student Name _____ UO ID# _____

_____ Account Index / Activity Code	_____ Timesheet Org	_____ Home Org	Type of pay <input type="checkbox"/> Work-Study <input type="checkbox"/> Tech-Work <input type="checkbox"/> No Aid
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Job Title _____ Pay Rate _____ Job Begin Date _____

Supervisor's Printed Name _____ Supervisor's UO ID# _____ Supervisor's UO E-mail _____

Supervisor's Signature _____	Date _____	Supervisor's Position # (if known) _____
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Department Budget/Grant Authority Section

Employment of this student as described above has been approved.

Department Budget/Grant Authority Signature _____ Date _____

Student Section

U.S. citizen? ☐ Yes ☐ No *If no: ☐ Resident Alien ☐ Non-Resident Alien

Which country? _____

UO E-mail _____@uoregon.edu

***Please read this agreement before signing**

I accept the responsibility for monitoring my hours and will not exceed the agreed-upon wage and hour limit above unless prior department approval is granted. I understand that the payroll period is from the 11th of the month through the 10th of the following month. **The payroll deadline each month is 5:00 p.m. on the 10th (or if payroll is closed, the next workday following)**, and I am responsible for making any necessary arrangement to ensure that my timesheet is signed by my supervisor and myself. **If my timesheet is late, I will make every effort to submit my timesheet as soon as possible past the due date.**

Student's Signature _____ Date _____