

**THREE RIVERS COMMUNITY COLLEGE  
FY17 STUDENT EMPLOYMENT AUTHORIZATION**

**INSTRUCTIONS:** All offices having a student employment budget must complete this form and send original to responsible Dean for processing. If the authorization is changed, e.g. an existing student employee quits, or the total budget is either increased or decreased, a **REVISED** authorization should be submitted. One student per authorization.

**STUDENTS WILL NOT BE PLACED ON PAYROLL UNTIL THE APPROVED FORM IS RECEIVED AND THEY HAVE COMPLETED ALL REQUIRED PAPERWORK IN THE PAYROLL OFFICE.**

**SUPERVISOR NAME:** \_\_\_\_\_

**OFFICE ASSIGNED TO:** \_\_\_\_\_

**\*\*SUPERVISOR SIGNATURE:** \_\_\_\_\_

**TOTAL BUDGET AUTHORIZED FOR THIS STUDENT:** \$ \_\_\_\_\_

**DATES OF EMPLOYMENT**

**\*\*Start Date:** \_\_\_\_\_

**\*\*End Date not to exceed Budget Year (6/30/17):** \_\_\_\_\_

| STUDENT NAME              | BANNER # | APPROVED FOR FINANCIAL AID WORKSTUDY | HOURLY RATE OF PAY |
|---------------------------|----------|--------------------------------------|--------------------|
| Click here to enter text. |          | YES<br>NO                            | \$                 |

\_\_\_\_\_  
RESPONSIBLE DEAN'S SIGNATURE

\_\_\_\_\_  
DATE

\_\_\_\_\_  
DEAN OF ADMINISTRATION

\_\_\_\_\_  
DATE

**SUPERVISORS ARE RESPONSIBLE FOR INSURING THAT BUDGET AMOUNTS ARE NOT EXCEEDED. PAYMENTS FOR HOURS WORKED IN EXCESS OF BUDGET LIMITS CANNOT BE MADE.**

**Business Office Use Only:** BUDGET CODE: \_\_\_\_\_

\_\_\_\_\_  
FUND ORGANIZATION PROGRAM

PCN#: \_\_\_\_\_