

WCU Wage Rate Petition

Student Data: Name: _____

92#: _____

Position Title: _____

Work-Study: Yes No

Current Wage Rate: _____

Proposed Wage Rate: _____

Department: _____

Supervisor: _____

Knowledge, skills & abilities required for wage rate consideration: (Provide specific detail – use back if necessary)

Employer's Signature

Date

Return form to: JoAnne Foster Phone Extension: 3183 Email: jfoster@wcu.edu Location: 118 Killian Annex

Office use only

APPROVED

DISAPPROVED

WAGE RATE: _____