Hourly Change Form for Non Work-Study Student Employment

## Student Position Information

Student’s Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Student ID: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Current Hiring Information:** Complete all of the information in this block as it appears on the most recent hiring form used to employ the student for the department. This helps us locate the current information in Banner.

Department: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Position Title: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_

Organization # (of the above dept) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Position Number: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Initial hire date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Hourly rate: \_\_\_\_\_\_\_\_ (NOTE: Contract pay increases cannot be made using this form. Please contact the Student Employment Office for details.)

## Department Approval Information

Complete the following information to authorize the changes in the blocks below:

Contact Person: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Phone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Bld/Rm \_\_\_\_\_\_\_

Dept. Budget Accountable Officer: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_

Signature of Accountable Officer: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Ext. \_\_\_\_\_\_\_\_\_

## Pay Rate Changes

NOTE: Changes will be effective at the start of the next pay cycle, if submitted at least five days prior to the start of the new cycle.

Current hourly rate: \_\_\_\_\_\_\_ Proposed hourly rate: \_\_\_\_\_\_\_

Paying above minimum wage: If paying $1 or more above minimum wage, please provide a brief justification for pay increase: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

## Approver changes

**Remove** the following:

Approver Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ 920: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ TS# \_\_\_\_\_\_\_\_\_\_

**Add** the following:

Approver Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ 920: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ TS# \_\_\_\_\_\_\_\_\_\_

## Termination of Employment

Complete the following to terminate a student worker early from employment. All students are automatically terminated on the day of graduation in May or the day before Fall classes begin if employed for summer. No action is needed if auto-termination would be acceptable.

Last day worked: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Reason for termination: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

For SE Office: Received by Student Employment Office: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Student Employment, Career Services 150 Reid Building 828-227-3888** [**http://studentemployment.wcu.edu**](http://studentemployment.wcu.edu)