



FINANCIAL AID USE

*HR will not process without FA approval

Academic Year: _____
 Awarded FWS: Yes / No
 FWS Award Amount: \$ _____
 G.P.A. _____
 Units Enrolled: _____
 FA SP SU
 FA Staff Initials: _____

MT. SAN JACINTO COLLEGE Student Employment Hire Slip

A: Student Section			New Hire:	Rehire:	Extension:
Student ID #:			Employee ID #:		
Last	First	MI	Job Posting #:		
B: Hiring Manager Section			FWS Budget Code: 12 __ 36 4101 0 _____ 0000 _____		
			Effective Date: _____ End Date: _____		
Date of Hire: _____ End Date: _____			District Budget Code: _____		
			Effective Date: _____ End Date: _____		
Hiring Manager:			CW/Job Connect Budget Code: _____		
			Effective Date: _____ End Date: _____		
Timesheet Monitoring Rep:			Categorical Grant Budget Code: _____		
			Effective Date: _____ End Date: _____		
Department Name:			Special Assignment: LRC Peer Tutor: _____ LRC EMBT: _____		
			LRC Greeter: _____ Library PRA: _____ CDEC Student Intern: _____		
Campus Location:			Rate of pay: \$16.90		
I agree to hire the above student under the terms of the Student/Employer Agreement. I understand that the student must meet eligibility criteria for each term, be enrolled in at least 6 units each semester, and will work no more than 20 hours each week for more than 8 hours per day. I am responsible for monitoring my student's earnings so that they do not earn more than their most recent FWS award.					
Hiring Manager Signature			Date		
Director/Dean Signature			Date		
Financial Aid Administrator Approval			Date		
Business Services Approval			HR Received		