Student Employment Worksheet

Student Name: ____________________________  Rowan ID: ____________________________

Grade Level: __________________________  Program of Study: _______________________________

Telephone: ____________________________

Have you previously worked for Rowan University?  Yes ☐  No ☐

Are you currently working for another department at Rowan University?  Yes ☐  No ☐

If answer is YES, please indicate the number of hours you work each week: _________________

Students may work no more than 20 hours per week while classes are in session and up to 25 hours per week during breaks, including summer break. Federal Work Study can work up to 30 hours during breaks.

Check one: ☐ New Student Employee  ☐ Continuing Student Employee

Position Number: ____________________  Fund : ________________________________

Organization: ________________________  Time Sheet Org: __________________________

Employment Period:  From: _____________________  To: ________________________

Regular Rate: ________________  FWS Award/(Referral Form Must be Attached): _______________________

Department: ______________________________  Requested Title: ____________________________

Supervisor’s Name: ______________________  Supervisor’s Phone Number: ______________________