



**STUDENT FINANCIAL SERVICES**  
**Student Employment Authorization Form**

**SEAF**

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**Section 1 – to be completed by student**

Name \_\_\_\_\_ Student ID # \_\_\_\_\_

Hourly Rate \_\_\_\_\_ Job Title \_\_\_\_\_

Department \_\_\_\_\_ Campus \_\_\_\_\_ Job Location \_\_\_\_\_

Supervisor's Name \_\_\_\_\_ Phone No. \_\_\_\_\_

*Students will be terminated if they are enrolled in less than 6 credit hours or their GPA has fallen below the minimum 2.0 requirement. Additionally, students may be terminated or have their hours reduced if they have received additional aid that will cause them to be overawarded after they are placed to work.*

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**Section 2 – to be completed by Employing Supervisor**

Date requested for beginning of employment \_\_\_\_\_ Term \_\_\_\_\_

Supervisor's signature \_\_\_\_\_ Date \_\_\_\_\_

Name of School \_\_\_\_\_

Please check if appropriate:  America Reads Tutor  America Counts Tutor

Comments \_\_\_\_\_

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**Supervisor:** Please send this form to the Student Financial Services Operations Center for employment authorization. Students may not begin to work until an authorized copy is returned to you or an email is sent confirming that the student is eligible to work by Student Financial Services. Departments will be responsible to pay students for any unauthorized hours. Keep a copy for your records.

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**Section 3 – to be completed by Student Employment Office**

**Student is not authorized to work until this section is signed below. If the account number states "void", the student is not authorized to work.**

Account Number \_\_\_\_\_

Authorized Student Financial Services Signature \_\_\_\_\_ Date \_\_\_\_\_

Eligibility Period \_\_\_\_\_ to \_\_\_\_\_  Fall  Winter  Summer

Authorized Hours per Week \_\_\_\_\_

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**Office Use Only**

Credits Enrolled \_\_\_\_\_ GPA \_\_\_\_\_ Amount of Award \_\_\_\_\_

Comments: \_\_\_\_\_