Northwestern State University Member of the University of Louisiana System Natchitoches, LA 71497

Department Request for Student Employees

Instructions:

- 1. Fully complete and return to the Student Employment Office by June 1.
- 2. Attach any additional sheets if necessary.
- 3. Have approving agent sign form.

Section 1: To be completed by the Requesting Department

PLEASE PRINT ALL INFORMATION

This information will be used to determine employment assignments, and to establish budgeting priorities for the Federal Work Study Program.

Contact Person (Please Print)		Phone Number	
Department		Requester's Sig	gnature
	Fall 2	Spring 2	Summer 2
Total Number of Student workers Requested			

Indicate the names of student workers in priority order you would like to see reassigned to your department OR removed from your department. (Attach additional sheets if necessary)

We would like the following students to be reassigned to our department

Name	CWID #	Name	CWID #
Please do not return the students li	sted below		
Name	CWID #	Reason	
Signature of Approving Agent		Date	

NOTE: Every effort will be made to place the students you requested in your department. Completion of this form is not a guarantee that your request will be met.