Please print or type all information and return to the JPC, Room SSV 171, X 6358
DATE OF REQUEST: __________________ POSTING DATES: __________________ TO __________________
REQUESTED BY: __________________ Extension: __________________
DEPARTMENT: __________________ Division: __________________
POSITION TITLE: __________________
(For example: Instructor’s Assistant, Clerical Aide, Reader, Tutor, Computer Lab Aide, Computer Tech Assistant, P.E. Aide, Special Event Aide, etc.)
NUMBER OF POSITIONS OPEN: __________
START DATE: __________ END DATE: __________ -OR- ☐ Last Day Of Semester ☐ END OF FISCAL YEAR
SCHEDULED HOURS FOR STUDENT TO WORK: ☐ AM ☐ PM to ☐ AM ☐ PM ☐ Hours Vary
SCHEDULED DAYS FOR STUDENT TO WORK: S ☐ M ☐ T ☐ W ☐ R ☐ F ☐ S ☐
TOTAL AMOUNT OF HOURS PER WEEK: __________________
BRIEFLY DESCRIBE THE STUDENT WORKERS DUTIE: __________________

PLEASE LIST DESIRED SKILLS & ABILITIES: __________________

PLEASE LIST ANY ADDITIONAL REQUIREMENTS: __________________

CATEGORY OF DIVISION STUDENT ASSISTANT BUDGET TO BE USED TO FUND STUDENT EMPLOYMENT:

<table>
<thead>
<tr>
<th>CATEGORY</th>
<th>ACCOUNT NUMBER</th>
</tr>
</thead>
<tbody>
<tr>
<td>District</td>
<td>01.9 60000.0 47000 00000 2302 320500</td>
</tr>
<tr>
<td>Federal Work Study</td>
<td>01.9 60000.0 47000 00000 2302 620100</td>
</tr>
<tr>
<td>CalWORKs Work Study</td>
<td>01.9 60000.0 47000 00000 2302 623600</td>
</tr>
</tbody>
</table>

NOTE TO SUPERVISOR: Students may not work until all employment and payroll forms have been completed and verification of eligibility to work has been submitted to the Job Placement Center. The Job Placement Center will instruct the Student Assistant regarding the first day they may begin work.

IMPORTANT AVC POLICY: Unless a student is a CalWORKs or GAIN participant, a student assistant cannot work more than 20 hours per week. If a student works more than one job on campus, total hours worked for all jobs combined cannot exceed 20 hours per week.

__________________________________________
Signature of Supervisor completing this form

__________________________________________
Signature of VP, Dean or Director responsible for Division Student Assistant Budget indicating appropriate rate of pay and budget/funding

7/21/2006