Student Employment Job Posting

Date Submitted __________________________ Org/Fund # ______

Immediate Supervisor ___________________________ Phone number __________________________

E-mail ______________________________________

Contact person if different than supervisor ________________________________ Phone __________________________

Position Number: ___________

Position Title ________________________________________________________________

Number of Openings ___________ Hours/Week __________ M T W H F S SUN

(Circle all that apply)

(check one) □ Summer 20___ □ Fall 20___ □ Spring 20___

(If new position or budget/fund change contact Vicki Clary - Student Employment for more instruction)

More Details: ________________________________________________________________

_________________________________________________________________________

_________________________________________________________________________

For CDO office use only:

Date received: __________ Date posted __________ Date inactive __________

Table Number at Fair __________