ROCKY MOUNTAIN COLLEGE

Work Study Authorization Form

STUDENT Instructions/Responsibilities – Upon receipt of this form, ensure that each department below receives and completes the form in the order indicated. It is your responsibility to ensure that it reaches the Human Resources Office, with all fields completed. Do not begin logging hours/doing work for the hiring department until it has been completely processed.

Name: _____ Phone: _____

Mailing Address: _____
Address City State & Zip

RMC email: _____

I have read and understand the student employment policies and procedures posted at http://rocky.edu/sites/default/files/employments-policies.pdf.

Student Signature: _____ Date: _____

Step 1A – To be completed by Financial Aid (Prescott Hall)

For the _____ academic year, the above student has been awarded:

☐ Rocky Work Study (6110) $_____

☐ Federal Work Study (6120) $_____

☐ Rocky Non-Need Work Study (6130) $_____

Financial Aid Signature: _____ Date: _____

Step 1B (ONLY if Rocky Work Study or Rocky Non-Need Work Study)

☐ Student Athlete (if box is unchecked, no signature is necessary) Sport _____

Athletic Director Signature _____ Date _____

Step 2A (ONLY if job is off-campus) – To be completed by Career Services (BFSC)

Employer/Business Name: _____

☐ Billable agency ☐ Non-billable agency

Career Services Signature: _____ Date: _____

Step 2B – To be completed by the supervisor

Department: _____ Supervisor: _____

Account Number: _____ Student Job Title: _____

RMC CareerLink Job ID: _____ Rate of Pay: _____ Est. Hours/Wk: _____

Date of Hire: _____ Estimated End Date: _____

I have read and understand the RMC work study program supervisor information.

Supervisor Signature: _____ Date: _____

Step 3 – To be completed by Human Resources (Eaton Hall)

Jenzabar ID _____ HR signature _____ Date _____