

## EMPLOYMENT REQUEST FORM (For University & Presidential Fellowship only)

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1. **Student's Name** (LAST, First and Middle Initial): \_\_\_\_\_
2. Student ID Number: \_\_\_\_\_
3. Department: \_\_\_\_\_
4. Date Request Submitted: \_\_\_\_\_
5. Program (check one):     Master's     Specialist     Doctoral
- Year in program: \_\_\_\_\_    Current GPA: \_\_\_\_\_

6. Employment requested for:
- Summer                      Year: \_\_\_\_\_
- Fall                              Number of hours per week: \_\_\_\_\_
- Spring

7. Credit hours the student will take this semester: \_\_\_\_\_

8. **A)** Is the student graduating this semester?     Yes     No
- B)** If no, expected date of graduation: \_\_\_\_\_

9. Justification for request (**please be specific**):

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As the Academic Dean/Departmental Chair, do you support the student's employment request during the tenure of the University Fellowship?

Yes                       No

\_\_\_\_\_  
Academic Dean or Department Chair Signature

\_\_\_\_\_  
Date

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Dean of Graduate Studies approval:     Yes     No

If not approved, reason for denial: \_\_\_\_\_

\_\_\_\_\_  
Dean of Graduate Studies Signature

\_\_\_\_\_  
Date