

Please submit form to the Office of Student Financial Aid.

Job Title: \_\_\_\_\_

Department: \_\_\_\_\_

Acct Number: \_\_\_\_\_

Reports to (Supervisor Name): \_\_\_\_\_

Basic: Perform entry level duties.

Maximum Hours: 19 hours per week

Hourly Rate: \$ \_\_\_\_\_

Supervised: General supervision; work is normally reviewed periodically.

General Duties:

Supervised: