

EIU GRADUATE SUMMER EMPLOYMENT AUTHORIZATION REQUEST
SALARIED

(TO BE USED ONLY FOR STUDENTS WHO WERE GRADUATE ASSISTANTS DURING SPRING SEMESTER)

Complete all blanks – failure to complete will result in the return of your request

STUDENT'S NAME _____ E # _____
Last First Initial

STUDENT'S BIRTH DATE _____

JOB TITLE _____ POSITION # **GSTU00**

JOB DUTIES (REQUIRED): _____

FOR SALARIED GRADUATE STUDENT EMPLOYEES, THE BEGINNING AND ENDING DATE MUST COINCIDE WITH THE BEGINNING AND ENDING DATES FOR GRADUATE ASSISTANT CONTRACTS AND MONTHLY PAYROLL. OTHER DATES USED WILL RESULT IN THE PRORATION OF THE EARNINGS.

BEGINNING DATE _____ ENDING DATE _____

MONTHLY PAY RATE \$ _____ (IF SOME MONTHS ARE PARTIAL PLEASE INDICATE BELOW)

PAY FOR MAY \$ _____ + PAY FOR JUNE \$ _____ + PAY FOR JULY \$ _____ + PAY FOR AUGUST \$ _____

= TOTAL AMOUNT \$ _____ **BANNER ORG CHARGE #** _____

PLEASE NOTE, THE PAYROLL OFFICE CAN NO LONGER STOP OR ADJUST A LUMP SUM PAYMENT TO EMPLOYEES. IF A STUDENT IS NOT TO BE PAID, THE JOB MUST BE TERMINATED IN THE GRADUATE SCHOOL.

DEPARTMENT NAME _____ BANNER ORG # _____

STUDENT HAS WORKED AS A GRADUATE ASSISTANT DURING SPRING SEMESTER ___ yes ___ or ___ no

SUPERVISOR _____ E # _____ PHONE # _____
Last First Initial

IMMEDIATE SUPERVISOR: _____ (optional)

We understand and will abide with the above stated conditions of Graduate Student Employment at EASTERN ILLINOIS UNIVERSITY.

STUDENT'S SIGNATURE _____ DATE _____

ACCOUNT MANAGER'S SIGNATURE _____ DATE _____

GRADUATE SCHOOL APPROVAL _____ DATE _____

For office use only:

Previous job _____ I-9 _____ Position Number _____ Suffix _____

PPAIDEN ___ PEAEMPL ___ NBAJOBS _____

Return completed form to The Graduate School, 1201 Blair Hall