STUDENT WORKER REQUEST

Campus: [ ]  Queens [ ] Staten Island [ ] Manhattan Date:

Department:       Org#:

Ext#:

Building Location:

Room #

Will interview be conducted at this location? [ ] Yes [ ] No

Supervisor’s Name:

Office Hours:

Type of Student Requesting: *(check one)*

 [ ] College Work Study Student [ ] Regular Student

Number of positions available:

Work Schedule: (Please be specific) (i.e.) 8:30 a.m.-12 p.m.

Duties and Responsibilities: (i.e.) Typing, filing, answering phones …

Skills: (i.e.) Basic Microsoft Word, Excel

Comments:

***Instructions****: Please complete this form and return to Darren Russell at* *russelld@stjohns.edu*

*in the Office of Human Resources.*