

STUDENT EMPLOYMENT RECOMMENDATION FOR CHANGE OF STATUS

SOUTHERN ILLINOIS UNIVERSITY

Send to: Student Employment Services, Student Services Building, 1st Floor, Suite 110, Mail Code 4703 (or fax to 453-4612)

				Effective Date
Name:	Last	First	Middle	Assignment Number
Department (Organization)			Job	

PAY RATE CHANGE	
Excess Qualifications/ Market Adjustment Increase _____	<i>(Indicate amount in 5 cent increments up to a maximum of 30 cents per hour.)</i>

COMMUNITY SERVICE CHANGE	
<input type="radio"/> Change from Community Service	
<input type="radio"/> Change to Community Service (<i>Community Service Job Description Number</i> _____)	

POSITION NUMBER CHANGE	
<input type="checkbox"/> Change from Position Number _____ ST. _____ .00	
<input type="checkbox"/> Change to Position Number _____ ST. _____ .00	
<i>(Important Notice: If the student employee is currently receiving a job classification or position specific increase, a change in their position number may affect the student employee's rate of pay)</i>	

Fiscal Officer Signature	Email	Date
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Fiscal Officer Signature	Email	Date
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Completed By (if other than fiscal officer)	Email	Date
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