HOUR INCREASE JUSTIFICATION FORM

Select One:  □ 03 Worker  □ 04 Worker

Student Name: _____________________________________________  CWID: ___________________________

Student Job Title: ___________________________  Department: ___________________________

Supervisor: ___________________________________________  Supervisor Phone#: ___________________________

Supervisor Email: ___________________________________________

Per the Campus Employment Handbook, student employees may not work more than 20 hours per week without prior approval. Extended work hours may be granted but cannot exceed 25 hours per week. Hour increases are neither retroactive nor automatic, and will not take effect until proper authorization has been obtained.

Federal law requires a rest period of ten minutes for every segment of four hours worked in one shift. For shifts of five hours or more, employees are required to take a thirty-minute unpaid lunch break. Please take these regulations into consideration when requesting additional hours.

Weekly Hours Requested: ___________________________

INDEX  FUND  ORGANIZATION  ACCOUNT  PROGRAM

Justification for increased hours:

___________________________________________________________________________________________
___________________________________________________________________________________________
___________________________________________________________________________________________

Supervisor Signature ___________________________  Date ___________________________

Budget Head Signature (Required for 03 Workers only) ___________________________  Date ___________________________

Controller Signature (Required for 03 Workers only) ___________________________  Date ___________________________

Submit this form to:  03 Workers – Human Resources, Coenen Hall 107
04 Workers – Career Center, Student Center 239

OFFICE USE ONLY

☐ Approved  ☐ Denied  Additional notes:

Processed By: ___________________________

Date: ___________________________