

Student Employee Re-Hire Form

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(For students with continuing work assignments)

Student Employee Name	Student A#	Student Employment Job Title	
Start Date	End Date	Rate of Pay	Projected Work Hours
<input type="text"/>	<input type="text"/>		

The above named student employee meets all the necessary requirements as outlined in the job description for which he/she applied.

DEPARTMENT

SUPERVISOR

E-Mail Address Requesting Supervisor

Office Number

By checking below, I acknowledge that the above named student employee meets all the necessary requirements as outlined in the job description for which he/she applied.

EEO Statement: Alcorn State University does not discriminate on the basis of race, color, religion, national origin, sex, sexual orientation, age, disability, or other factors prohibited by law in any of its educational programs, activities, services, admissions, or employment practices.