

# The University of Akron Career Services - Student Employment

Student Union 211 Akron, OH 44325-4306 Email: studentemployment@uakron.edu Phone: 330-972-7747

## Change Form: Pay/Account/Status/Termination

TO BE COMPLETED BY HIRING SUPERVISOR										
Student ID	Student Last Name			Student First Name		Student's current FWS status Federal Work Study (FWS) Non-FWS				
<b>CHANGE(S) TO BE MADE WITH THIS FORM:</b> <table style="width: 100%; border: none;"> <tr> <td style="width: 35%; border: none;">                     Pay rate change <b>*student sign. required</b>                      Add Account Code(s)                      Change Account Code(s)                 </td> <td style="width: 30%; border: none; text-align: center;"> <i>Indicate change in student FWS status below:</i>                      Federal Work Study (FWS) to Non-FWS                      Non-FWS to Federal Work Study                 </td> <td style="width: 35%; border: none; text-align: center;">                     Termination                 </td> </tr> </table>								Pay rate change <b>*student sign. required</b> Add Account Code(s) Change Account Code(s)	<i>Indicate change in student FWS status below:</i> Federal Work Study (FWS) to Non-FWS Non-FWS to Federal Work Study	Termination
Pay rate change <b>*student sign. required</b> Add Account Code(s) Change Account Code(s)	<i>Indicate change in student FWS status below:</i> Federal Work Study (FWS) to Non-FWS Non-FWS to Federal Work Study	Termination								
Effective date		Department			Dept Code					
Supervisor Name			Supervisor Email		Supervisor Phone Ext.	Zip + 4				
Current Pay Rate \$ _____/hour	New Pay Rate <b>*student signature required</b> \$ _____/hour		Current Account Code	Change Account Code(s) to	Add Account Code(s)					
Job description:				Rationale for Change:						
Signature of Student Employee <b>(needed for any pay rate change)</b>				Date	(Additional signature if needed)		Date			
Signature of Department Head				Date						

TO BE COMPLETED BY CAREER SERVICES STUDENT EMPLOYMENT							
FWS period of eligibility to work  TO					Amount of FWS award: <b>*The award may be modified due to future changes in eligibility or due to available funding</b>  \$ _____ May work a maximum of 29 hours/week		
Fall	Spring	Inter	Sum I	Sum 8 week	Sum II	Credit Hrs.	Rank  Pay rate \$ _____ /hour
Signature of Career Services Student Employment					Date	Processor's Initials	Record #

*Incomplete forms submitted without information or signatures will be returned to the department and will delay processing. Revised 1/26/21*