

Department

Student Aid

1244 Blossom St., Suite 200 • Columbia, SC 29208 803-777-8134 • 803-777-6017 fax www.sc.edu/financialaid

Date

REQUEST FOR STUDENT SERVICES

Position or Job # Position of Employing Department Name Department Contact Contact Phone Number Hire Change Termination			Positions		I9 form: is attached has been submitted			Expenditure Class Codes 51422 Undergraduate Work-Study 51424 Undergraduate Work-Study Non-enrolled 51426 Graduate Work-Study No Assistantship 51420 Undergraduate Non-Work-Study 51423 Undergraduate Non-Work Study Non-Enrolled			
							– Work-Study – Non-Work-Study ·k-Study / No Assistantsh			Community Service Yes No	
Note: Re	quests for Gr	aduate Assistan	ts other than G	raduate Wo	ork-Stud	y listed al	oove mu	ıst be subn	nitted on	form P	BP-3G
Social Security Number			Class		Slot						
Name First		Middle	Middle Last			Effective Date			Year		
Salary Hour Rate			Part Time		Full Time Basis			Home Department			
2. Begin Date Month Day Year			End Date ar Month			Year	Hrs/V	/eek			
Hrs/Appt.	·		Emp Type		Day Reg	Bran	TTV	FLSA	1	2	3
Check Dist.		Time Di	Time Dist.		Fed	Y N	State	Y N	FICA	Y N	
Override			+	Expect	ed Earni			I9 Date	e Month	Day	Year
Dept.	Fund	Class	Class Analy		F FS V O		Campus		Amount		Percent
SIGNATURES	S										

Date

Date

Payroll