

## Student Employment Exception Request Form

*(This form needs to be filled out by the supervisor—not the student employee.)*

Student's Name:					
Student's I-Number:					
Student's Job Title:					
Student's Supervisor:					
Department:					
Semester:	Fall ( )	Winter ( )	Spring ( )	Summer ( )	On-going ( )

1. Please explain the circumstances surrounding your request—what are you requesting and why?

2. What alternatives to filling the position have you already pursued and why are they insufficient?

**REQUIRED SIGNATURES:**

Immediate Supervisor:		Date:
Director (or Dept. Chair):		Date:
Managing Director (or Dean):		Date:
*Vice President:		Date:

Return to Human Resources following the Vice President's approval.

\* President's Council approval is required for exceptions to the Employment of Relatives Policy.