

**OFFICE USE ONLY**

Date form received: _____

1. Work-Study Award Attached
2. Student Employment Application completed
3. I-9 completed

UNIVERSITY OF MICHIGAN**Temporary Employee and Work-Study Appointment Request Form**

Submit completed form to A&D Dean's Office at least 7 days prior to the employee's anticipated start date. **IMPORTANT:** Employee is not authorized to work until the request for appointment is processed and the employee has completed required paperwork. Supervisors will be notified by the Dean's Office when an employee is authorized to begin working.

About the Employee**Name:** _____**UMID (if known):** _____**Mailing Address:****Telephone Number:** __________
Street / P.O. Box**Current UM Student?** Yes ☐ No ☐_____
City / State / Zip**Work-Study Award?** Yes ☐ No ☐*If yes, enter amount: \$* _____**Email Address:** _____**Previously employed at UM?** Yes ☐ No ☐**About the Position****Supervisor's Name:** _____ **Start Date:** _____**Supervisor's UMID:** _____ **Hourly Pay Rate:** _____**Shortcode:** _____**Position Title:**☐ Studio Assistant (14774)☐ Gallery Assistant (7082)☐ Office Assistant (22302)☐ Production Assistant (17114)☐ Other, please describe:**Supervisor's Signature** _____**Send completed form to the A&D Dean's Office via:**

- Campus mail (2055 A&A, campus zip 2069)
- Fax (734-615-9753)
- Email as a .pdf document (a&dhr@umich.edu).