-	Contract Reques	ted By			
		INSTITUTIONAL STUDEN	T EMPLOYEE CONT	RACT	
		is a	authorized to work th	e total number of hou	rs
Specified at	\$	_ per hour			
SEMESTER:		_ AVG HRS PER WEEK: _	TOTAL HRS:		
Student Financial Services			Date		Verified
•••••	• • • • • • • • • • • • • • • • • • • •				•••••
	TO BE C	OMPLETED BY DEPARTMENT	BEFORE STUDENT E	BEGINS WORK	
Student Job Description:			Account Number:		
			-		
			-		
Immodiata Cunar	vicer				
Immediate Supervisor:		Signature		Date	
Account Sponsor:					
**********		Signature	****	Date	*****
) BE SIGNED BY STUDENT B		VORK	
with the Automat read, understood	ic Deposit Tran and accepted	ny Social Security number and semittal and that these are on the conditions of this contractive NUMBER OF HOURS LIST	n file in the Business ct. I understand this	Office. I further certif	fy that I have
	-	that all financial obligations ment Program before each c	-		received under
Student Signature	e:				
5 J 1 / 2 / 2				Date	
SEND TOP ORI	GINAL TO: Pavr	oll DISTRIBUTE OTHER COP	IES TO: Student Financ	cial Services – Supervisor	- Employee

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