

STUDENT WAGE EXCEPTION FORM

Department _____

Student's Name _____

UID _____

Hourly Rate Requested _____

Job Duties & Responsibilities of Position for which Exception is Requested:

Qualifications of Student: specify qualifications including education, work, experiences, etc. _____

Signature of Department Head or Representative

Date

Please Print – Dept Head or Representative

Signature of Director of University Human Resources

Date

Instructions: Send one copy of the approved form to the University Human Resources Department and retain one copy at department level. Attach an additional sheet if more space is needed in either the “Job Duties & Responsibilities” or “Qualifications of Student” sections above.