

WESTERN OREGON
University
Library and Media Services

Student Employee Agreement

Student Name:
Unit:

Job Title:
Hire Date:

Your application for employment in the Library has been reviewed and approved, subject to satisfactory performance during your two week trial period. All student employees are required to obtain a work study or non-work study sticker on their student identification cards at the start of fall term or the first term of employment. Stickers are issued by the Western Payroll Office, but not until registration fees are paid. Before beginning your assigned shift(s) for the term, show your identification card with sticker to your supervisor. The unit supervisor will complete the shaded section(s) below.

Conditions of Employment:

1. Each employee will work the hours assigned by the unit supervisor for this term.
2. Each employee will notify the unit supervisor in advance when unable to work assigned shift(s).
3. Each employee will read and follow the rules and regulations in the LMS Student Employee Manual and annually review the MSDS and Safety Manuals.

Each employee will learn the specific routines and duties of the position

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|--|----------------------------|--|------|
| Fall Term: | | I.D. Card Sticker _____ Workstudy Non-Workstudy | |
| I do _____/do not _____ have a job in any other department using my workstudy award. I have read the student manual and agree to follow the guidelines listed: | | | |
| Hours/Week | Student Employee Signature | Supervisor Signature | Date |
| Winter Term: | | I.D. Card Sticker _____ Workstudy Non-Workstudy | |
| I do _____/do not _____ have a job in any other department using my workstudy award. I have read the student manual and agree to follow the guidelines listed: | | | |
| Hours/Week | Student Employee Signature | Supervisor Signature | Date |
| Spring Term: | | I.D. Card Sticker _____ Workstudy Non-Workstudy | |
| I do _____/do not _____ have a job in any other department using my workstudy award. I have read the student manual and agree to follow the guidelines listed: | | | |
| Hours/Week | Student Employee Signature | Supervisor Signature | Date |
| Summer Term: | | I.D. Card Sticker _____ Workstudy Non-Workstudy | |
| I do _____/do not _____ have a job in any other department using my workstudy award. I have read the student manual and agree to follow the guidelines listed: | | | |
| Hours/Week | Student Employee Signature | Supervisor Signature | Date |

This agreement is subject to renewal each term, and is not effective without current signatures.