

# OKLAHOMA BAPTIST UNIVERSITY

Office of Human Resources

## STUDENT WORK CONTRACT

_____ Name (as it appears on Social Security card)		_____ Social Security Card Number			
_____ OBU ID#		<b>FR</b>	<b>SO</b>	<b>JR</b>	<b>SR</b>
_____ Campus Address		_____ Telephone number			
_____ Permanent Address: Street		_____ City	_____ State	_____ Zip Code	

Currently enrolled in how many credit hours? \_\_\_\_\_

### WORK AGREEMENT

I hereby accept employment from Oklahoma Baptist University with the understanding that the scheduling of my employment will be at the discretion of the Department, and that I will be available for assignment during holiday periods, final examination week, and enrollment periods, if required. I will treat as confidential all matters communicated to me in the performance of my duties and I will discharge my responsibility to the best of my ability.

#### I understand that I

1. am limited to **20 hours of campus work per week** and
2. must maintain at least **6 hours enrollment during spring and fall term to preserve my student worker status.**

Signed \_\_\_\_\_ Date \_\_\_\_\_

<b>The Human Resources office has received W-4 and I-9 forms and the student may begin work.</b>	
Signed _____	Date _____

Department	Org Key	Supervisor	CWS/NCWS	Hourly Rate

### DECLARATION OF INTENT TO APPLY STUDENT WAGES TO TUITION & FEES

Please deduct \$ \_\_\_\_\_ from my bi-weekly check to pay on my account with the University.

Signed \_\_\_\_\_ Date \_\_\_\_\_