

Macalester College - Student Employment Award Release Form

Full Release

(I am changing jobs completely)

Partial Release

(I am going to work in two departments)

For the following Semesters: Fall

January Only

Spring

(Check all that apply)

Step 1

Student Name: _____ ID# _____ Grade: _____

Student: I agree to the conditions of this transfer.

Student Signature

Date

Step 2

Current/Old Department: _____

Last Day of Work: _____
(If applicable)

Current/Old Supervisor Name: _____ Supervisor ID# _____

Current/Old Position Title: _____

Current/Old Department: *Please retain a copy before returning to the Student Employment Office.*

I agree to release this student to work all or part of their award in another department. I understand that I no longer have responsibility to pay this portion of their award from my department's student employment budget.

Amount Released: \$ _____

(From Current/Old Employer to New Employer)

Current/Old Supervisor's Signature

Date

Step 3

New Department: _____ Organization # _____ Begin Date: _____

New Supervisor Name: _____ Supervisor ID# _____

New Position Title: _____ Pay Rate: _____

New Department: *Please retain a copy before returning to the Student Employment Office.*

I agree to hire this student to work for the amount listed above. I understand that I must have the funds available in my student employment budget to cover these earnings.

New Supervisor's Signature

Date