



LAKE SUPERIOR STATE UNIVERSITY

Student Payroll Authorization

The payroll authorization **must be completed and approved before an individual begins work.** Responsibility for obtaining approval rests with the area in which the employee is to work. If students are unable to apply and accept positions on the student job board, please complete this form and submit to Human Resources.

FName _____ LName _____ A # _____

Department _____ Job Title _____

Complete all fields Fund _____ Org _____ Acct _____ Prog _____ Activ. Code _____ % _____
Ex. 1000 10650 6610 60 100%

Fund _____ Org _____ Acct _____ Prog _____ Activ. Code _____ % _____
Ex. 1000 10650 6610 60 100%

For New Students

Check One Dept. FWS Grant

Check One LSSU Student High School Student International Student Off Campus Student

Average Hours per Week _____

No. of Weeks _____

Hourly Rate _____
If above minimum, attach approval email

Total Authorized _____

Date on Payroll _____

Date Off Payroll _____

Remarks _____

For Updates

Check One Dept. FWS Grant

Change rate from \$ _____ to \$ _____ Effective Date _____
Attach approval email

Remarks _____

Change funding from Fund _____ Org _____ Acct _____ Prog _____ Activ. Code _____ % _____
Ex. 1000 10650 6610 60 100%

Change funding to Fund _____ Org _____ Acct _____ Prog _____ Activ. Code _____ % _____
Ex. 1000 10650 6610 60 100%

Supervisor Approval _____ Date _____

Budget Approval _____ Date _____

For HR Office Use

W/C _____

Academic Year Enrollment _____ # credits

Summer Enrollment _____ # credits

FICA Yes No

Position Number _____

Completed by _____