

Montana Tech Student Employment Certification

Student Success Center 3.126

Phone:406-496-4223

Renewal is required for summer and fall employment annually

SECTION 1: STUDENT INFORMATION (To Be Completed By The Student) *All fields must be completed or form will be returned*						
Student ID		Student Last Name		Student First Name	Middle Initial	
Permanent Mailing Address (Paychecks will be mailed here)			City	State	Zip Code	
Birth Date		Telephone Number		Email Address		
<input type="checkbox"/> Male <input type="checkbox"/> Female	I certify that I am: <input type="checkbox"/> A citizen of the United States <input type="checkbox"/> A noncitizen national of the United States <input type="checkbox"/> A lawful permanent resident <input type="checkbox"/> An alien authorized to work			Year in School: <input type="checkbox"/> 1 st year Highlands <input type="checkbox"/> 2 nd year Highlands <input type="checkbox"/> Freshman <input type="checkbox"/> Sophomore <input type="checkbox"/> Junior <input type="checkbox"/> Senior <input type="checkbox"/> Post Bacc <input type="checkbox"/> Grad		
Previously employed at Montana Tech within the last 2 years? <input type="checkbox"/> Yes <input type="checkbox"/> No: Complete entire Student Employment Packet						
Have you been offered work-study funding? (Work-study may only be used for one position) <input type="checkbox"/> No <input type="checkbox"/> Yes: will you use it for this position? <input type="checkbox"/> Yes <input type="checkbox"/> No			Have you been offered a GTA or GRA? <input type="checkbox"/> No <input type="checkbox"/> Yes: What department? _____			
Student Signature				Date		
SECTION 2: EMPLOYMENT INFORMATION (To Be Completed By Supervisor) *All fields must be completed or form will be returned*						
Employing Department			Job Title			
For this position, employee is <input type="checkbox"/> New <input type="checkbox"/> Returning		Expected Employment Period Beginning ____/____/____ Ending ____/____/____ Month / Day / Year Month / Day / Year		Approximate hrs/week		
Hourly Wage (See Job Classification & Wage Guidelines) \$		Send timecards to:		Charge to Depart./Project #		
Job Description (Justification is REQUIRED if wage is above entry rate, complete the " Montana Tech Student Employment Justification for Higher Wage " form, see Job Classification & Wage Guidelines for more information)						
Supervisor Name (please print)		Email Address (please print)		Supervisor Signature		Date
SECTION 3: FOR OFFICE USE ONLY						
WS offer accepted? <input type="checkbox"/> Yes <input type="checkbox"/> No		Amount \$ _____		Offered Terms: Fall _____ Spring _____		
Job Classification _____		<input type="checkbox"/> 1225 (NWS) <input type="checkbox"/> 1226 (FWS) <input type="checkbox"/> 1228(SWS) <input type="checkbox"/> 1126 GTA <input type="checkbox"/> 1127 GRA				
WC: <input type="checkbox"/> Low <input type="checkbox"/> High		Semester Credits: Fall _____ Spring _____ Summer _____				

For any questions regarding Student Employment, refer to the [Student Employment Policy and Guidelines](#) at mtech.edu

Effective 07/01/2021