Butte-Glenn Community College District
JOB AUTHORIZATION

Handshake Job #: _____

Student Name: _____ Butte ID: _____

Last First

Student email: _____

Is eligible to earn $ _____ for the ☐ FALL ☐ SPRING ☐ SUMMER
(For work study students only)

semester(s) of the 20-____ 20-____ academic year.

Award approved by: _____

This student cannot be paid in excess of the amount listed above.

Units enrolled: _____ Rate of Pay: _____ per hour

Employer/Department: _____

Student Signature: _____

Supervisor Signature: _____

Dean/Designee Signature: _____

Budget Code #1: _____

Budget Code #2: _____

STUDENT MAY NOT WORK UNTIL GIVEN THE OK BY THE HUMAN RESOURCES DEPARTMENT.

A new authorization card is required every July 1.

Human Resource Office Use Only:

I-9 ☐ W-4 ☐ Live Scan ☐ OK to work email sent ☐