



Lander University

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Lander University Student Employment

Job Description Request

Department:

Department ORG# to be charged:

Department INDEX# to be charged:

Supervisor:

Phone:

Room#:

E-mail:

Length of Employment (Check all that apply)

- Fall Semester
- Spring Semester
- Summer Session
- Other (specify dates), _____

FWS Required: **DYES** NO

Job Title for Student Position (Required):

Job Duties:

Job Qualifications:

Wage

Supervisor Signature: _____

Date: _____

Printed/Typed Name: _____

Phone: _____

Department Head Signature: _____

Date: _____

Printed/Typed Name: _____

Phone: _____