



**Student Information**

BU ID # \_\_\_\_\_

**Circle one:**  
College: AEP BUS CFA EGT EHS LAS GRD

Class Ranking: SO JR SR

Major \_\_\_\_\_

Name \_\_\_\_\_  
(print)

Phone \_\_\_\_\_ BU Email \_\_\_\_\_

**Employer Information**

Organization \_\_\_\_\_ City, State \_\_\_\_\_

Supervisor Name \_\_\_\_\_ Title \_\_\_\_\_

Street Address \_\_\_\_\_ City, State, Zip \_\_\_\_\_

Phone \_\_\_\_\_ Email Address (if available) \_\_\_\_\_

**Work Assignment Information**

*(One form required for each work assignment)*

Fall \_\_\_\_\_ Full-time \_\_\_\_\_ Starting (month/day/year) \_\_\_\_\_

Jan. Interim \_\_\_\_\_ Part-time \_\_\_\_\_ Ending (month/day/year) \_\_\_\_\_

Spring \_\_\_\_\_

Summer \_\_\_\_\_ Hours Worked Per Week \_\_\_\_\_  
(Actual—Do Not List Range)

Hourly Wage \_\_\_\_\_ Hours Worked Per Work Assignment \_\_\_\_\_  
(Include hours worked during breaks & finals)

Credit Hours Requested \_\_\_\_\_ Work Assignment # \_\_\_\_\_

Student Signature \_\_\_\_\_ Date \_\_\_\_\_

FOR OFFICE USE ONLY - FOR OFFICE USE ONLY - FOR OFFICE USE ONLY - FOR OFFICE USE ONLY - FOR OFFICE USE ONLY - FOR OFFICE USE ONLY

\_\_\_\_\_ Full-time \_\_\_\_\_ New Employer \_\_\_\_\_ Advisor Notified \_\_\_\_\_ CPT

\_\_\_\_\_ Part-time \_\_\_\_\_ Continuing Employer \_\_\_\_\_ Required GPA Verified

Course # \_\_\_\_\_ / \_\_\_\_\_ Approved Semester Hours \_\_\_\_\_  
Section #

Career Advisor Signature \_\_\_\_\_ Date \_\_\_\_\_

<b>GRANT VERIFIED:</b> <input type="checkbox"/> Undergraduate <input type="checkbox"/> IL Resident Date: _____ Amount: _____
<b>INTERNAT'L STUDENT</b> Sent: _____ <input type="checkbox"/> Copy of Reg. Form <input type="checkbox"/> Copy this Form Date: _____
<b>SCC DATABASE ENTRY</b> Date: _____ Initials: _____

