University Library
Extension Form for Student Assistant Employment

This form is to be completed and sent to the Library Personnel Office (CB# 3932) before the beginning of each semester or summer session. It is to be completed for each student currently on the payroll who will continue employment during the summer session or next semester.

Date: _____________

Department: ____________________________________________________________

Last Name: ______________________________________________________________

First Name: _____________________________________________________________

Local Address: _______________________________________________________________________

City: ______________ State: _____ Zip: ______ Local Phone: ______________

Name of Supervisor: ________________________________

Period of Extension
[Check the appropriate box]

☐ Fall ☐ Spring ☐ Summer Session I ☐ Summer Session II

Statement of Department Supervisor

I wish to continue employing this student for the period indicated above for _______ hours per week at $ __________ per hour.

Paid from Account #: ________________________________

Signature of Department Supervisor ________________________________

Statement of Student Employee

I will be a registered UNC student during the _____________ semester or Summer Session ______. I will be registered for _______ hours.

______________________________________________

Signature of Student Employee

Updated 7/26/2006