



**Student Employment
Pay Rate Request Form**
St. Cloud State University



The purpose of this form is to request a rate of pay greater than the set rate for on-campus student employees, currently \$10.08 - \$12.08 per hour. This form is only needed for pay rates greater than \$12.08 per hour. Please answer the following questions as completely as possible and **attach to this form a complete, new job description that supports the increased duties, skills, and pay.** Signatures of the supervisor and the person responsible for the cost center are required at the bottom of the form. Return to the Financial Aid Office, AS106.

Student Name _____ Department _____

Position/Title _____ Tech ID or StarID _____

Work Assignment Information:

1. Supervisory responsibilities? Yes No

If so, please describe the number of persons supervised and the functions supervised.

2. Previous experience within department or previous supervisory experience? If so, please describe.

3. Special skills, licensure or certification? Yes No

If so, please describe the special skills and/or the duration and complexity of the training the student has received.

4. Work outside regular department hours (e.g., 8am to 4:30pm)? Yes No

Please describe the assignment's normal work schedule (days of the week, hours of day).

5. Work with confidential/sensitive information? Yes No

If so, please describe the nature of information the assignment is working with confidential/sensitive information.

6. Provide a unique service to the campus? Yes No

If so, please describe what makes this service unique. _____

If there are other reasons the position should be paid above \$12.08/hr., briefly specify your reasons below. If market factors are one of the reasons cited, please provide objective evidence of the rate of pay provided in the community for similar work assignments.

Recommended hourly wage \$ _____/hour

Supervisor: Sign _____ Print _____ Date _____

Cost Center Responsible Person: Sign _____ Print _____ Date _____

Financial Aid: Sign _____ Print _____ Date _____

Wage approved \$ _____/hour