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**STUDENT EMPLOYEE**

**REQUISITION/PERSONNEL ACTION REQUEST FORM**

*Please follow the Requisition Guidelines for assistance****.***

***Incomplete Requisitions will be returned to the Preparer and will delay requested transaction.***

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| **GENERAL INFORMATION** | | | | | | | |  | | | | | | | | | |
| **Date** | **Preparer’s Name** | | | | | | **Department/Division** | | | | | | | | | | |
| **PART I: EMPLOYEE INFORMATION** | | | | | | | |  | | | | | | | | | |
| **CHRS ID#** | | | **Student Employee’s Legal Name**  Last, First, Middle Initial | | | | | | | | | | | | | | |
| **PART II: ACTION REQUESTED – (Select ALL that apply) See Guidelines for definitions  New Hire  Concurrent Appointment** | | | | | | | | | | | | | | | | | |
| **Student Assistant (1860)**  **Federal Work Study On Campus (1861)**  **Federal Work Study Off Campus (1872)**  **Bridge Student Assistant (1874)**  **Bridge FWS On Campus (1875)**  **Bridge FWS Off Campus (1876)** | | | | **Non Resident Alien Tax (1868)** | | | | | **For Existing Student Employees**  **From Academic Year to Bridge**  **From Bridge to Academic Year** | | | | **Salary Change**  **Working Title Change**  **Supervisor Change**  **Funding Source Change** | | | | |
| Effective Date of Action: | | | | Ending Date: | | | | | Explanation of Action: | | | | | | | | |
| **PART III: POSITION/ASSIGNMENT INFORMATION** | | | | | | | | | | | | | | | | | |
| **FROM** | | **Current Assignment -** Complete all Blocks | | | | | | **TO** | | **Proposed Assignment –** Complete all Blocks | | | | | | | |
| Home Dept. Code | | Home Department Name | | | | | Unit Code | Home Dept. Code | | | | Home Department Name | | | | Unit Code | |
| Class (Job) Code | | Skill Level | | | Position # | | | Class (Job) Code | | | | Skill Level | | | Position # | | |
| Working Title | | | | | | | | Working Title | | | | | | | | | |
| Reports To Administrator’s Name/Title (MPP) | | | | | | | | Reports To Administrator’s Name/Title (MPP) | | | | | | | | | |
| TLSS Supervisor’s Name/Title | | | | | | | | TLSS Supervisor’s Name/Title | | | | | | | | | |
| Hourly Rate  $ | | | | | | | | Hourly Rate  $ | | | | | | | | | |
| **PART IV: SIGNATURES/APPROVALS (Complete only those required)** | | | | | | | | | | | | | | | | | |
| Name of Administrator (MPP)/Title: | | | | | | Signature: | | | | | | | | Date: | | | Extension: |
| Name of Department/Division Director: | | | | | | Signature: | | | | | | | | Date: | | | Extension: |
| Name of Department Budget Officer: | | | | | | Signature: | | | | | | | | Date: | | | Extension: |
| Name of Financial Aid Representative (required on FWS): | | | | | | Signature: | | | | | | | | Date: | | | Extension: |
| **PART V: HR USE ONLY** | | | | | | | | | | | | | | | | | |
| **Req #:** | | | | **Background CK:** | | | | | | | **PeopleSoft:** | | | | | | |
| **Initial/Date:** | | | | **Initial/Date:** | | | | | | | **Initial/Date:** | | | | | | |

**California State University Channel Islands Student Requisition Form/Personnel Action Guidelines**

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| General Information | |
| Date | Date form is prepared |
| Preparer’s Name | The contact name of the person completing the requisition form |
| Department/Division | Requesting Department and Division |
| Extension | Telephone extension for the person completing the form |
| Part I: Student Employee Information | |
| CHRS ID # | Unique identification number |
| Student Employee’s Legal Name | Student employee’s legal name |
| **Part II: Action Requested** | |
| New Hire | Initial hire to a Student employee role |
| Concurrent Appointment | New hire into an additional student employee assignment |
| Student Assistant | Student Assistant job during the academic year |
| Bridge Student Assistant | Student Assistant job during the summer break |
| Federal Work Study | Work Study student employees with award from Financial Aid Office |
| From Academic Year to Bridge | Student continues employment into the Summer Bridge Period |
| From Bridge to Academic Year | Student continues employment after Summer Bridge into new Academic Year |
| Salary Change | Based on change in duties or on basis of merit |
| Working Title Change | Change of working title |
| Supervisor Change | Change in Supervisor to whom student assistant reports |
| Funding Source Change | Change in Funding Source |
| Effective Date of Action and Ending Date | Date the requested assignment/action will begin and end |
| Explanation of Action | For example - “Filling position vacated by XX” |
| **Part III: Position/Assignment Information** | |
| Home Department Code | Code for Department that owns the position |
| Home Department Name | Name of Department that owns the position |
| Unit Code | Payroll Warrant Code |
| Class (Job) Code | CSU 4-digit classification code aka Job Code (See Action Requested) |
| Skill Level | Refer to Student Assistant Guidelines |
| Position # | Position Number provided by Budget |
| Working Title | Working title of the position |
| Reports To Administrator’s Name/Title | Must be an MPP |
| TLSS Supervisor’s Name/Title | Individual who directs work and approves timesheets in Time & Labor Self-Service (TLSS) |
| Hourly Rate | Hourly rate of pay |
| **Part IV: Signatures/Approvals:** | |
| The names, title, and signature of the individuals authorized to approve the requested action | |

Rev. 08/05/2025