

TEXAS SOUTHERN UNIVERSITY

Office of Student Financial Assistance

Ph: 713-313-7071 • Fax: 713-313-1859 • financialaid@tsu.edu • www.em.tsu.edu

Work-Study Job Request Form

Supervisor Contact Information – Please complete all fields.		Location:	On-Campus
Supervisor Name		Supervisor Title	
Building/Department		Room#/Floor	
Phone Number		Email Address	
Backup Supervisor		Backup Title	
Backup Phone Number		Backup Email	

Days/Hours of Operation – Please enter the hours your department is open on the specified days.

EXAMPLE	OPEN: 8:00am	CLOSE: 5:00pm	THURSDAY		
MONDAY			FRIDAY		
TUESDAY			SATURDAY	OPEN:	CLOSE:
WEDNESDAY			SUNDAY	OPEN:	CLOSE:

Job Information – Attach additional documents, if needed.

Job Title		Work Location		No. of Positions	
Minimum GPA Requirement		Major			

Job Description:

Dress Code:

Objective (What [skills, experiences] will the student develop in this position?)

Date:

Work-Study Office Only

Date Posted Online	Work-Study Coordinator _____
JOBREQ#	Date _____

Please send your documents to:

Texas Southern University

Office of Student Financial Assistance

3100 Cleburne Street • Houston, TX 77004