

### THREE JOB MEMO – STUDENTS WORKING THREE JOBS

Student Name Name UNM ID UNM ID

Students working three jobs cannot exceed the maximum number of hours indicated in the table below while working all positions. Departments will be charged 100% excess for work study students who exceed the maximum weekly work hours allowed.

Maximum work hours allowed for students per work week (Saturday through Friday):

	Fall	Interession*	Spring	Summer*
<b>Domestic Students</b>	28	28*	28	28*
<b>International Students</b>	20	28*	20	28*

\* During the summer session & winter interession, students may work up to 28 hours per week (with department approval) if they meet the following requirements:

- 1) **Completed** six (6) credit hours at UNM for the previous semester (fall for Interession or spring for the summer semester), **and**
- 2) Enrolled in at least six (6) credit hours at UNM for the upcoming semester (spring for Interession and fall for the summer semester)

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I am aware that the above student is working for **three** departments. I understand that he/she **cannot** exceed the maximum hours per week allowed for students for the semester that they will be employed. The number of hours the student will work is \_\_\_\_ hours per week (work week is Saturday through Friday).

Primary Department Name: Department Name Org #: \_\_\_\_\_

Supervisor Name: Supervisor Name Signature \_\_\_\_\_ Date \_\_\_\_\_

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I am aware that the above student is working for **two other** departments. I understand that he/she **cannot** exceed the maximum hours per week allowed for students for the semester that they will be employed. The number of hours the student will work is \_\_\_\_ hours per week (work week is Saturday through Friday).

Secondary Department Name: Department Name Org #: \_\_\_\_\_

Supervisor Name: Supervisor Name Signature \_\_\_\_\_ Date \_\_\_\_\_

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I am aware that the above student is working for **two other** departments. I understand that he/she **cannot** exceed the maximum hours per week allowed for students for the semester that they will be employed. The number of hours the student will work is \_\_\_\_ hours per week (work week is Saturday through Friday).

Tertiary Department Name: Department Name Org #: \_\_\_\_\_

Supervisor Name: Supervisor Name Signature \_\_\_\_\_ Date \_\_\_\_\_

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#### Student Statement:

I agree to adhere to the number of hours per week that are listed above for each department. I understand that exceeding the maximum hours allowed will result in the termination of each assignment.

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

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#### (OFFICE USE ONLY)

Student Employment Office Approval \_\_\_\_\_ Date \_\_\_\_\_