



## Information Systems – New/Rehire Form Student Worker and Federal Work Study Students

### To Be Completed by the SUPERVISOR:

(Complete all the required information to ensure accounts are set-up correctly. *Please print clearly.*)

Full Name of Work Study Student: \_\_\_\_\_

Start Date: \_\_\_\_\_

Last Four Digits of Student Social Security Number: \_\_\_\_\_

Fisher ID Number: \_\_\_\_\_

#### Employee Type:

Federal Work Study Student

Student Worker

Name of Supervisor: \_\_\_\_\_

Supervisor's Job Title: \_\_\_\_\_

Department Name: \_\_\_\_\_

Department Code / Cost Center (i.e. 1100): \_\_\_\_\_

Office Location: \_\_\_\_\_

Recommended Scan Permissions: \_\_\_\_\_

Create a Work Study email account: (Circle one)      Yes      No

Access to department email account: (Circle one)      Yes      No

Equipment Request: \_\_\_\_\_

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

Please email completed form to [is-team@fisher.edu](mailto:is-team@fisher.edu)