

ENROLLMENT AGREEMENT

Riverside City College Student Employment

Academic Year 20/20	by the student	(Incom <u>p</u>	<u>lete information</u>	will cause a delay i	n processing this form)
Student Name – As Printed on Social Security Ca	ard (Please Prin	() '''''''	""Hiring Site / De	partment Name	
XXX - XX -					
Social Security Number (Last 4 Digits)		_	Manager Name	(Please Print)	Phone # and Extension
Special Circumstances:(Required)					
I As Printed on Social Security Card	_, certify that I	will er	roll and attend	Riverside City	College for the following
As Printed on Social Security Card semester(s) ugrgevgf below:	·			-	
Fall with Late Start	Fall	111	Spring	Spring	with Late Start
Student Education Plan (SEP) copy has indicated above OR I am registered for the	e semester indica				
Total number of registered un (Currently attending & late sta	its art units) ——		for th	e above term.	
This form is for the purpose of m air will be kept on file as evidence of m y above (Fall or Spring 6 or more units) accurate and true.	intent. I m ust	be enre	olled at least ha	alf-time during the	e sem ester stated
Student's Signature				Date	
Manager Section: to be completed	by the superv	isor (In	complete information	on will cause a delay i	in processing this form)
This form is for the purpose of m ainta College. This document will be kept of half-time during the sem ester stated a employment of the above named studen	n file as evidence above (Fall or Sp	e of the	e student's inten 6 or more uni	it. Students must its). By signing b	be enrolled at least
Manager's Signature				Date	

Original: Student Employment • 1 Copy: Supervisor • 1 Copy: Student

Before being approved all budgets that the student is hired in will be checked for funding availability.