

Mark all that apply:

FWS District LAEP Calworks

PROMOTION REQUEST FORM

Riverside Community College District

Student Employment

Student ID # _____

Student Name – As Printed on Social Security Card (Please Print) _____

Last 4 Digits of Social Security Number _____

Hiring Site Name _____ Location _____

Supervisor Name _____ Phone # and Extension _____

District Budget Code #2 _____

Department Budget Code #4 _____

District Budget Code #1 _____

Department Budget Code #3 _____

Department Budget Code #5 _____

New rate requested \$ _____ Old Category: Student Aide

New Category: Student Aide
(Must have a Position Request Form on file)

Reason for Increase: Added duties More advanced skills required to complete new tasks

Supervisor's Signature: _____

Date: _____

**** Please Note: It may take one or two full pay cycles for a pay increase to take effect ****

FOR OFFICE USE ONLY

STUDENT INFO

CGPA _____

Current/Last Enrolled Units _____ Term _____

Federal Work Study (FWS)

| | | | | | | | | | | | |
|--------------|---|--------------|---|----------|---|------------------|----------------------|-----|-----|----|----|
| _____ | - | _____ | / | _____ | = | _____ | OC | AMR | AMC | CS | LT |
| Award Amount | | YTD Earnings | | Pay Rate | | Balance of Hours | Program (Circle One) | | | | |

Calworks (CWS)

| | | | | | | |
|--------------|---|--------------|---|----------|---|------------------|
| _____ | - | _____ | / | _____ | = | _____ |
| Award Amount | | YTD Earnings | | Pay Rate | | Balance of Hours |

LAEP

| | | | | | | |
|--------------|---|--------------|---|----------|---|------------------|
| _____ | - | _____ | / | _____ | = | _____ |
| Award Amount | | YTD Earnings | | Pay Rate | | Balance of Hours |

DISTRICT

| | | | | | | | | | | |
|------------------------------------|----------------|---------------------------|-------------|---|-------|------------------|-------------------|-------------------|-----------------------------|--|
| Budget Code #1 YTD Earnings: _____ | Balance: _____ | Projected Earnings: _____ | Remain Mths | X | _____ | Monthly Earnings | - Balance = _____ | Potential Balance | <input type="checkbox"/> OK | <input type="checkbox"/> Transfer Required |
| Budget Code #2 YTD Earnings: _____ | Balance: _____ | Projected Earnings: _____ | Remain Mths | X | _____ | Monthly Earnings | - Balance = _____ | Potential Balance | <input type="checkbox"/> OK | <input type="checkbox"/> Transfer Required |
| Budget Code #3 YTD Earnings: _____ | Balance: _____ | Projected Earnings: _____ | Remain Mths | X | _____ | Monthly Earnings | - Balance = _____ | Potential Balance | <input type="checkbox"/> OK | <input type="checkbox"/> Transfer Required |
| Budget Code #4 YTD Earnings: _____ | Balance: _____ | Projected Earnings: _____ | Remain Mths | X | _____ | Monthly Earnings | - Balance = _____ | Potential Balance | <input type="checkbox"/> OK | <input type="checkbox"/> Transfer Required |
| Budget Code #5 YTD Earnings: _____ | Balance: _____ | Projected Earnings: _____ | Remain Mths | X | _____ | Monthly Earnings | - Balance = _____ | Potential Balance | <input type="checkbox"/> OK | <input type="checkbox"/> Transfer Required |

Effective Payroll: _____ Pending Transfer # _____ for budget(s) # _____

Approved Denied Signature: _____ Date: _____
Student Employment Dean/Director/Manager

Original to Student Employment ♦ Student and Supervisor: processed copies will be returned