



PERMISSION TO WORK

NAME: _____ (please print) SID # _____
CAMPUS EMAIL: _____

Although I am not registered for classes, I am seeking permission to work as a student employee during the

select one: Fall Spring Summer

The reason I am not registered is:

I will be studying abroad in _____ from _____
(country) (list dates or terms)

Attach proof of enrollment in the program

I have an unpaid balance of \$_____ on my account that is preventing me from registering.
Please explain how your bill will be paid. Be specific. If you plan to use your earnings, list your anticipated
hours per payroll period and the amount you will pay. Complete "Intent to Register" on back.

Empty rectangular box for explanation of unpaid balance.

Other: Please explain, and complete "Intent to Register" on back.

Empty rectangular box for other explanation.

STUDENT SIGNATURE _____ DATE _____

Please note: Students who are not enrolled at UWS at least-half time during the period of employment may not be
exempt from social security and Medicare withholdings.

OFFICE USE ONLY:

Approved Denied By: _____ Date _____

NOTES:

Large empty rectangular box for notes.

INTENT TO REGISTER (not necessary for students studying abroad)

I, _____, (*name*) intend to register for the following classes
as soon as I am able:

Catalog Number	Class Title	# of Credits

Please Note: This form does NOT register you for these classes; it is for our information only.

STUDENT SIGNATURE _____ **DATE** _____

ADVISOR SIGNATURE _____ **DATE** _____

Return this form to Student Employment, Old Main 110,
PO Box 2000, Superior, WI 54880
Fax: 715-394-8027
Email: studentemployment@uwsuper.edu