

TERM _____

Work-Study Job Description Form

***Lewis-Clark State College
Financial Aid Office***

Department: _____

Campus Address: _____

Contact Person: _____ Phone Number: _____

Job Title: _____

Desired Skills: _____

Job Description/Duties: _____

Resume Required: _____ Yes _____ No

Hours Per Week: _____

Hourly Pay Rate: _____

Please submit to the Financial Aid Office, Reid Hall 208