To: UH Hilo Student Employee Supervisors  
Re: Multi-Employment Form

Students holding two or more UH Hilo student employment positions must not exceed a total of **twenty (20)** hours per week for all jobs combined during the regular semesters. Enter the number of hours the student will be working at each job for all sessions including related information for each position.

Once the form has been signed by all supervisors, the last supervisor to sign will submit the original to the UH Hilo Student Employment office. If the student has more than two positions, attach a second memo. Keep in mind that the Student Employment Work Agreement (SEWA) will not be approved until the completed and signed memo is received by the UH Hilo Student Employment office.

Overtime for students who exceed eight hours in a day between jobs will be assessed to the second or third employer to whom the student submits a timesheet for a given pay period. Students shall not work more than 29 hours per week during non-instructional periods. You may contact the UH Hilo Student Employment office at (808) 932-7355 or at stemploy@hawaii.edu if you have questions.

Violation of the terms of this form may result in termination of employment.

<table>
<thead>
<tr>
<th>Student Name (Print)</th>
<th>Signature</th>
<th>Date</th>
<th>UH ID#</th>
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**TOTAL COMBINED HOURS DURING THE SEMESTER MUST NOT EXCEED 20 HOURS/WEEK**

Fall/Spring Semester: _____ hrs/wk  
Breaks (Winter/Summer): _____ hrs/wk

Student’s Position Title & Job#: ______________________

Department & Campus: ______________________

Detailed Work Schedule (days and hours):

Source of Funds: [ ] Federal [ ] State (check one): [ ] G-Fund or [ ] Other (specify): ______________________

Supervisor/Employer Name (Print) | Signature | Date

Fall/Spring Semester: _____ hrs/wk  
Breaks (Winter/Summer): _____ hrs/wk

Student’s Position Title & Job#: ______________________

Department & Campus: ______________________

Detailed Work Schedule (days and hours):

Source of Funds: [ ] Federal [ ] State (check one): [ ] G-Fund or [ ] Other (specify): ______________________

Supervisor/Employer Name (Print) | Signature | Date

Office Use Only | Date memo was received: