This form advises Sb (	(se)-8 ee if more than one i	s needed for the same department/site
If you haveany question	s orconcerns, you macontact	StudenEmploymentat (951)
Academic Year 20 2	20 <u> </u>	
% Add Designated Authorization % Add Temporary/Emergency Authorization Checking either boxill advise us of additionalersons authorized to approve and sign student loymen paperwork		% Change Designated Authorization % ChangeTemporary/Emergency Authorization
Name of Department/Site		Date of Authorization
Designated Authorize	**************************************	*****************
•	uuthorized to approves <b>igmo</b> pape	erworkn aregularbasis
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	enaryd the abovelesignee and the pprove and sign papeans/carrik all	ne approval si <b>gnee</b> not available for signature, the following ternate
Name of Designee	(Please type)	Signature of Psignee
Approval Signature	**********	***********************************
-		prove and sign paperwork necessary in employing students in n
Name of Dean, Director, ManagéPlease type) Principal, Asst. Principal, Deptead.		Signature of Dean, Director, Manager, Principal, AssPrincipal, Dept. Head.