

Financial Aid/Student Employment Office
103 John Wilder Tower

Office: (901) 678-4825
FAX: (901) 678-5902

PAYRATE JUSTIFICATION FORM

U ID Number _____

Student's Name _____ Last 4 of SSN XXX - XX - _____

Department Name _____

Position No. _____ Index _____ Org # _____

This is to justify paying the above student \$ _____ per hour, effective _____.

1. Duties/Responsibilities of position:

2. Qualifications/Experience/Education of referenced student:

*Any wage over \$16.00 an hour must have approval from the department's head and Financial Aid Director.

Approved by

Dept. Head, Dean, Director, or Manager

Financial Aid Director

_____ @memphis.edu
Email Address

Date