



Return this form to:
Carl Albert State College
Office of Financial Aid
Hemphill Hall – HH102 or
Fax: 918-647-1227

Work-Study Job Posting Request

Semester/Year: Fall: 22 Spring: 23 Summer: _____

Type of WS: Federal Institutional

Department (Dept#): 1428

Campus: Poteau Sallisaw Off Campus

Building: Givers Center Office/Room #: 1513

Job Duties/Responsibilities: Overseeing Givers Center, checking in people, & clean equipment.

Schedule: (Possible working hours)	Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday
	6-11	6-11	6-11	6-11	6-11	6-11	1-6

Supervisor Name: Lexi Watson

Email: lswatson@carl.albert.edu

Phone #: 918-647-1283

Other Information (if applicable): _____