

EST. 1933

Return this form to: workstudy@carlabert.edu

Office of Financial Aid

- Federal Work-Study

Business Office

- Institutional Work-Study

Work-Study Job Posting Request

Semester	/Year:	Fall: <u>202</u> 5	Spring: Z	2026 Si	ımmer:	_	
Type of WS: Institutional							
Departm	ent Name/#	: Stive	ers Con	ter			
Campus:			ıw Off Ca	,			
Building: Stivers Center Office/Room #:							
Job Duti Cleani and	es/Responsi	bilities: Ment, MM M M M M M M M M M M M M	nning into	anural	games,	Checking	Strolenz
Schedule	e :						
(Possible working hours)	Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday
	6:00pm	9:00 am	9:00 am	9:00am	9:00 am	9:00 am - 4:00 pm	closed
	11:00 pm	11:00 pm	11:00 pm	11:00 pm	11:00 pm	4:00 pm	
S	En	nail: <u>ASW</u> e #: <u>918</u>	i Wate latson@ 647 12	carlalbe	ert edu	,	
Other In	formation (if	applicable):					