DECLARATION OF OFF-SEMESTER

Student Name: _______________________________ Student ID: 00
(Please Print) (9 digits)

Student Signature: _______________________________ Date: _______________

Semester: ______________________________________ Academic Year: _______

Student Assistants/College Work-Study Students may declare one semester of each academic year as an off-
semester. During the off-semester, it is permissible to work more than 20 hours per week, but not more than
40 hours per week, pending Supervisor’s approval.

Supervisor’s Signature: _______________________________ Access ID: _______________

Department: ______________________________________ Date: _______________

Student Assistant: _______________ College Work-Study: _______________

College Work-Study Students must enroll for the requisite number of credit-hours and satisfy all work-hours
conditions as required by the Office of Student Financial Aid. For further information, please visit

International Students: Prior to submitting this form to Career Services, international students must contact
the Office of International Students and Scholars for authorization.

Upon completion, please email to Cheryl Dove at cdove@wayne.edu, or hand deliver to Career Services.