

EMPLOYMENT VERIFICATION FOR REDUCED STUDY LIST

*For **CNR students only**, all other students should consult with their college for policies and procedures regarding reduced course loads.
 Please return completed form to: *Office of Instruction & Student Affairs, 260 Mulford Hall*
 Berkeley, CA 94720-3100 • Tel: (510) 642-0542 • Fax: (510) 643-3132

Name: _____ SID #: _____

Local Address: _____

Phone #: _____ Major: _____

E-mail Address: _____ Term: _____ Desired Number of Units: _____

Employer license or Tax ID # _____ (mandatory)

Employer: _____ Employer Phone #: _____

Employer's Address: _____

Job Description: _____

Hours/Week¹: _____ Is This Paid Employment?² Yes No

Employment Begins on (mm/dd/yy): _____ Ends on (mm/dd/yy): _____

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Supervisor's Name (Please print): _____

Supervisor's Signature: _____ Date: _____

- This form must be turned in **EACH SEMESTER** you enroll with fewer than 13 units.
- **DEADLINE:** The last day to submit this form is Friday of the third week of instruction
- You will be able to reduce your study list according to the number of hours per week that you work:

Hours	Units
15-19	10
20-29	8
30 or more	6

- 1 Please be specific. Hours listed as variable will not be approved (e.g. "10-20 hrs/wk"); average your work hours, if necessary.
- 2 Volunteer work is not recognized as justification for a reduced study list. Please talk to your major advisor to discuss alternatives

This Semester's Proposed Schedule:	Courses	Units
Fall _____		
Spring _____		
Summer _____		

I certify that the above information is correct.

Student Signature: _____ Date: _____

FOR CNR OFFICE USE ONLY

Verification of Hours:
 Verified by: _____ Date Verified: _____ Hours Reported: _____
 Academic Advisor Approval:
 Processed by: _____ Date Processed: _____