

P 206-281-2047 E ose@spu.edu F 206-281-2835 3307 Third Avenue West, Suite 114, Seattle, Washington 98119 SPU.EDU/OSE

2025-26 Student Employee Overtime Petition Form

	Student Name:] [SPU ID#:	
	- 14401			1		
durin	g the b	ents working on campus are limi reaks (Summer, Christmas Brea ate or 3+ for graduate) during th	k, & Spring Break).	If a stu	udent is enrolled half-time or	•
oerio petiti	d of ti on, stu	uating circumstances, students ne but not more than 30 hours plants must complete this form a situation in this particular situation.	per week to compl and include a state	y with t	the Affordable Care Act. In o	rder to submit a
		st be submitted at least 10 busi equate time to review them.	i ness days prior to	the tim	e in question. Late petitions	may be denied if
	1.	Position Name:				
	2.	Supervisor Name:				
	3.	Number of Hours per Week Re	equested & Why:			
	4.	The Expected Duration of the	Overtime:			
	5. Explanation of How Student will Maintain Satisfactory Academic Standing while Working Additional Hours:					
	I ha	re provided a response to all que	estions above.			
	I ha	re attached a statement from m	y supervisor regard	ding the	e departmental needs that ne	ecessitate this request.
Stude	nt Signa	ture	Date Ph	one	Email	