



Office for Student Financial Affairs  
Division of Enrollment Management

## Hours Extension

S107 Criser Hall  
PO Box 114025  
Gainesville, FL 32611-4025  
352-392-1275/392-1275 TDD  
352-392-2861 Fax  
www.sfa.ufl.edu

**Department Information-** The primary reason students attend UF is to pursue their educational goals. Employment should not interfere or take priority over students' educational pursuits. For this reason, students who are registered full time are **limited to working 20 hours per week**. Students registered full time and working 20 hours per week, in combination with study hours, have approximately 40 hours per week of time devoted to those activities. Students who are registered full time and would like to work **up to 31 hours per week**, must complete the Hours Extension form. Once students complete the Hours Extension form they are to return it to the employing department for submission to Student Employment.

**Student Section-** Please read and complete the student section. Next, take this form to your Academic Advisor and ask them to complete their section. Finally, please take the completed form to your employing department.

Name \_\_\_\_\_ UF ID \_\_\_\_\_

Address \_\_\_\_\_

Phone Number \_\_\_\_\_

Email Address \_\_\_\_\_

Please circle one: Undergraduate      Graduate

I am requesting to work a total of \_\_\_\_\_ hours per week in the department(s) of \_\_\_\_\_.

**Academic Advisor Section-** The above student is requesting to work more than 20 hours per week on campus. We are asking you to please meet with the student and complete the Academic Advisor Section. The Student Employment Office, based on your recommendation, will make a final determination. Thank you for your input and assistance regarding the student's circumstances. After meeting with the student, my recommendation is:

Academic Standing: Good \_\_\_\_\_ Warning \_\_\_\_\_ Probation \_\_\_\_\_ Suspension \_\_\_\_\_

\_\_\_\_\_ Recommend Approval      \_\_\_\_\_ Recommend Denial      Comments:

\_\_\_\_\_ Academic Advisor's Signature

\_\_\_\_\_ Academic Advisor's E-mail

### Financial Aid Administrator's Section-For Graduate Students Only

This section is to be completed by a Student Employment Coordinator.

\_\_\_\_\_ Reviewed      Comments:

\_\_\_\_\_ Signature

\_\_\_\_\_ Date