

Montana Tech Student Employee Wage Change Request

Student Name:

Student ID:

Department Index:

Montana Tech Student Employee Evaluation

Student Name: _____	Student ID: _____	Original Start Date: _____
Department: _____	JobTitle: _____	
Year in School: 1 st year Highlands 2 nd year Highlands Freshman Sophomore Junior Senior PostBacc Grad		
Duties: _____		

Justification for Increase: _____		

