To: UH Employers
From: Mānoa Career Center
Re: Multi-Job Memo (Two or more University jobs)

Students holding two or more UH student employment positions must not exceed a total of twenty (20) hours per week for all jobs combined during the regular semesters. Enter the number of hours the student will be working at each job for all sessions including related information for each position. Once the form has been signed by all supervisors, submit the original to the Mānoa Career Center. If the student has more than two positions, attach a second memo. Keep in mind that the Student Employment Work Agreement (SEWA) will not be approved until the completed and signed memo is received by the Mānoa Career Center.

Overtime for students who exceed eight hours in a day between jobs will be assessed to the second or third employer to whom the student submits a timesheet for a given pay period. If the student works over forty hours between all positions, it is the responsibility of the employers to determine who will pay for the overtime and add the appropriate number of hours to properly compensate the student as the system will not automatically do so. You may contact the Mānoa Career Center if you have questions.

Violation of the terms of this memo may result in termination of employment.

TOTAL COMBINED HOURS DURING THE SEMESTER MUST NOT EXCEED 20 HOURS/WEEK

Fall/Spring Semester: _______ hrs/wk  Breaks (Winter/Summer): _______ hrs/wk

Student’s Position Title & Job#: ____________________________________________________________

Department & Campus ________________________________________________________________

Supervisor’s Name (Print) ___________________________ Signature ___________________________ Date ________________

Breaks (Winter/Summer)：__________ hrs/wk

Fall/Spring Semester: _______ hrs/wk  Breaks (Winter/Summer): _______ hrs/wk

Student’s Position Title & Job#: ____________________________________________________________

Department & Campus ________________________________________________________________

Supervisor’s Name (Print) ___________________________ Signature ___________________________ Date ________________