Center FOR Student Business
STUDENT RUN BUSINESSES FOR THE UNIVERSITY COMMUNITY

Hiring Committee Report

Name of Business: _____

Semester/Year _____

Date Hiring Process was completed: _____

note: please return this report to the CSB within 24 hours of offering positions to new co-managers.

Please list all new Co-Managers

Name	Email	Phone	Grad Date Sem/Yr

Committee Information

Please list the names of all Hiring Committee Members

_____ _____
_____ _____
_____ _____
_____ _____
_____ _____

I verify that all new Co-Managers have been given a Checklist for New Students at Hiring and by accepting the offer of employment in a Student Business, each Co-Manager has agreed to bring completed forms and acceptable forms of ID to the CSB office within 72 hours. Acceptable Forms of ID are described on the back of the I-9 Employment Eligibility Verification form.

_____ _____
Signature of Hiring Committee Member Date