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**JOB DESCRIPTION - Student Assistant**

**Prepared by**

**Project Name**  **Job title**

**Hours per week** 20/week  **Length of appointment**

**Name of supervisor**   **Extension**

**Purpose of the job (definition)**

**Primary Duties and Responsibilities:**

**Job Qualifications**

**Knowledge of**

**Ability to**

**Experience**

**Education**

*\* This position is subject to criminal and other background checks and the incumbent must pass and hold a satisfactory outcome at all times.* (MUST BE INCLUDED IF APPLICABLE, otherwise – delete)

**Work Environment:**

**Physical Demands (Put an “X” in the box indicating the appropriate % for each activity):**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Activity | 0 – 24% | 25 – 49% | 50 – 74% | 75 – 100% |
| ***Seeing:***Must be able to read reports and use computer |  |  |  |  |
| ***Hearing:***Must be able to hear well enough to communicate with co-workers and on the telephone |  |  |  |  |
| ***Standing/Walking/Mobility:***Must be able to stand to open files and operate business office machines; mobility between departments and to attend meetings |  |  |  |  |
| ***Climbing/Stooping/Kneeling:*** |  |  |  |  |
| ***Lifting/Pulling/Pushing:*** Up to 20 lbs. |  |  |  |  |
| ***Fingering/Grasping/Feeling:*** Must be able to write, type, and use phone system |  |  |  |  |

**Working with Minors (please mark one):**

YES  NO  (if yes, please contact CSUSM Corporation Human Resources, [hrcorp@csusm.edu](mailto:hrcorp@csusm.edu) to request the required Live Scan fingerprinting clearance for working with minors)

**Driving on CSUSM Corporation Business (please mark one):**

Will NOT drive  Required to drive (1 or more times per week)

Occasionally drives (Less than 1 time per week)  Required to drive and transport passengers

**General:**

The employee is expected to adhere to all CSUSM Corporation policies and procedures outlined in the employment handbook. This in no way alters the “at will” relationship of employment.

I have read and understand this explanation and job description:

Employee Name (Please Print)

Signature of Employee Date

Supervisor Name (Please Print)

Signature of Supervisor Date