## **REFERRAL FOR INTERVIEW FORM**



## PLEASE COMPLETE, SIGN, AND RETURN THIS FORM TO FINANCIAL AID.

Date:	Employing Department:	Job Number:
Applicant:	New Hire Transfer Promotion	Title:
Replacement For:	PIN # If new position, enter NEW	Hours per Week: Wage \$ Per Hour
Paying Acct. #: Hiring Supervisor:	Office Location & Phone Ext.	Desired Hiring Date:

## COMPLETE THIS SECTION BY SELECTING "A" OR "B" AS APPLICABLE.

<ul> <li>A Applicant is selected for employment. (This is subject to compliance review by Financial Aid Office.</li> <li>Name of Reporting/Evaluating Supervisor:</li> <li>Has this person previously worked for the A&amp;M System?</li> <li>YES</li> <li>NO</li> </ul>		
B Applicant is not selected for employment, Indicate applicable reason(s) below.		
<ul> <li>This applicant's education and/or experience is less relevant than that of the applicant selected.</li> <li>This applicant's skills (communication, computer, etc.) are not as strong as those of applicant selected.</li> <li>This applicant is unable to meet the work schedule of the position.</li> <li>This applicant's interview was less effective than that of the applicant selected.</li> <li>This applicant failed to report to the scheduled interview.</li> <li>Other:</li> </ul> My signature certifies that the best-qualified applicant has been selected and that Equal Employment Opportunity practices have been observed.		
Hiring Supervisor Signature Date		
For Student Employment Coordinator Use Only		
Estimated end date: N/A May 31 Other:		

Office of Financial Aid

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