

**Kentucky Higher Education Assistance Authority  
KHEAA Work-Study Program  
Position Analysis**

1. Employer's Name \_\_\_\_\_  
 Address \_\_\_\_\_  
 City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_  
 Contact Person's Name \_\_\_\_\_ Title \_\_\_\_\_  
 Telephone Number (\_\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_ E-mail Address \_\_\_\_\_  
area code

Indicate:     Private  
                    Public  
                    Higher education institution

Type of Business \_\_\_\_\_

2. Provide the following position data:

A. Position title \_\_\_\_\_ B. Minimum hours required per week \_\_\_\_\_  
 C. Student's name \_\_\_\_\_ D. Major field of study \_\_\_\_\_  
 E. Pay per hour \$ \_\_\_\_\_ F. Date of Employment \_\_\_\_\_

G. Additional benefits:

Insurance: <input type="checkbox"/> Life <input type="checkbox"/> Medical <input type="checkbox"/> Dental	Other: <input type="checkbox"/> Travel <input type="checkbox"/> Retirement <input type="checkbox"/> Annual leave <input type="checkbox"/> Sick leave	<input type="checkbox"/> _____ (Please indicate) <input type="checkbox"/> _____ (Please indicate)
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3. List the minimum requirements including special job skills needed.

4. Describe the major duties/responsibilities of this job.

The student will be employed under the conditions stated above and will not be utilized in work or work environments which are sectarian in nature or which involve partisan or non-partisan political activities.

Form certified by:

\_\_\_\_\_

KWSP Officer Signature	Employer Signature
_____	_____
Date	Date
_____	_____