|  |  |  |
| --- | --- | --- |
| bu logo-01 (2) | sa_cc |  |

**Student Helper Weekly Working Hours Operation System (WHOS) - Working Hour Supplement Form**

Important Notice to Students:

* Please ensure that this form is completed by THE RESPECTIVE STUDENT and submitted to the Career Centre within 3 working days.
* The supplemental information you provide will be directly input into the WHOS database. Please be aware that this bypasses WHOS’s safeguards, potentially risking your total working hours exceeding the weekly limit permitted for students.

Remarks:

Under normal circumstances, students must log your work details and obtain a **permit** via WHOS **before** commencing any student helper role. This form is intended as an exception and **should be used sparingly**.

|  |  |  |
| --- | --- | --- |
|  | **Date:** |  |

|  |  |  |  |
| --- | --- | --- | --- |
| **Student ID:** |  | **Name in English:** |  |
| **Mobile:** |  | **Non-BU Email:** |  |

***Working Hour Supplement:***

**Working Details:**

|  |  |
| --- | --- |
| **Department:** |  |
| **Date:** |  |
| **Start Time:** |  |
| **End Time:** |  |
| **Duties:** |  |

|  |  |
| --- | --- |
| **Reason for Missing Input to WHOS:** |  |

|  |  |
| --- | --- |
| **Signature by Student:** |  |

|  |  |  |
| --- | --- | --- |
| **Office Stamp** | **Approved by (Name of Staff)** | **Tel / Ext No.** |
|  |
| **For Career Centre Use Only:**

|  |  |  |
| --- | --- | --- |
| **Received Date** | **Approved Date** | **Officer In-charge** |

 |

**Please return this form to Career Centre (WLB 402, The Wing Lung Bank Building for Business Studies, Shaw Campus) within 3 working days.**