2018/ 2019 Financial Aid
WORK STUDY APPLICATION

NAME _____**TELEPHONE:** _____

STREET _____**CITY** _____ **STATE** _____ **ZIP** _____

STUDENT ID:_____ **BIRTHDATE** _____

MAJOR _____ **GRADUATION DATE:**_____

Work Study Award year is July 1, 2017 to June 30, 2018.

Employment History

_____**New Hire for 2018/ 2019**

_____**Rehire from 2017/2018 academic year**

Work Site Placement

Are you willing to travel Off-Campus? Y or N

Do you have a Work Site preference? Please list location:_____

Have you worked in this location during a previous term? Y / N

WHEN DO YOU WISH TO BEGIN EMPLOYMENT?

_____ **SUMMER, BEGINNING JULY 2, 2018**

___FALL 18 SEMESTER ___SPRING 19 SEMESTER

WS applicants must submit a valid photo ID (State or School ID) and a Social Security card with completed paperwork for processing and payroll . See back for complete list of acceptable documents.

I HEREBY AFFIRM THAT ALL OF THE ABOVE INFORMATION IS TRUE AND CORRECT TO THE BEST OF MY KNOWLEDGE.

APPLICANT'S SIGNATURE _____ **DATE** _____

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OFFICE USE ONLY

17/18 FAFSA_____ **PACKAGED**_____**A WARD:** _____ **F)** _____**(S)**

WORK PLACEMENT SITE:_____

SUPERVISOR_____**PHONE:**_____**EXT:**_____