Summer 2017
Federal Work Study Student
Employment Application

- To be considered for Federal Work Study for the summer session covered by this application the applicant must have a valid 2016-2017 FAFSA on file, accessible to WCU and meet the eligibility requirements to receive federal financial aid.
- Students are also required to be enrolled for the fall 2017 term and have demonstrated financial need which will be reviewed using their 2017-18 FAFSA.
- Employment awards and assignments are based on the availability of funds and departmental needs during the summer term.
- If students are not taking courses during the summer and utilized their full allocation for their current work study position, there is a chance they will not qualify for work study in the summer term.

Eligible students will be notified of their eligibility and placement, via their WCU email accounts. Please check your WCU e-mail account and monitor your aid package via myWCU, for financial aid alerts, on a regular basis.

Federal Work Study awards, unlike other sources of financial aid, will NOT appear as anticipated aid on your account summary/bill. Students receive direct, bi-weekly compensation for the hours worked. Earnings are intended for educational expenses.

Federal Work Study Student Employment program participants may hold only one job processed by the WCU Payroll Office. Students offered Federal Work Study are under no obligation to accept the offer.

Not all students interested in the Federal Work Study Program will be able to participate due to the eligibility guidelines governing the program and limited funding.

Please detach this page and keep for your records prior to submitting your application.

For additional information please visit our web site at www.wcupa.edu/workstudyjobs
Summer 2017  
Federal Work Study Student Employment Application  
Priority deadline ~ June 1, 2017  

Student Name: ___________________________  
Last Name  __________  First Name  __________  WCU ID or S.S. #  __________  

Telephone #  __________  When are your graduating?  __________  

Are you taking courses this summer? □ Yes □ No  
If yes, please list the number of credits you will be taking in: Session 1_____Session 2_____Session 3_____  

Have you registered for Fall 2017? □ Yes □ No  
Have you filed your 2017-18 FAFSA □ Yes □ No  

Where do you plan to live this summer? (Check one)  
□ On campus housing  □ Traditional or □ Affiliated (USH)  __________  Hall  
□ With parents? □ Off campus □ : Provide address  __________  

Please state your desired department in order of preference.  www.wcupa.edu/workstudyjobs  
1st  __________  2nd  __________  3rd  __________  

Are you currently part of the Federal Work Study Program? □ Yes □ No  
If yes, do you want to be reassigned to your current location? □ Yes □ No  
If yes, what is your supervisor’s name (print)  __________  
**If yes, please secure your supervisor's signature (REQUIRED)  __________  

Supervisors- It is recommended that you keep a signed dated copy of this application for your records if you are requesting a student for the summer term.  

Please check all skills and experience that apply:  
□ Art/Graphics □ Audiovisual □ Theatre/Costume □ Customer Relations □ Library  
□ Mailroom □ Foreign Language  __________  □ College Tutorial experience  
□ Athletic (coaching, ref, trainer) □ Clerical/Office Exp. □ Computer skills (Excel, MS Word, PowerPoint) □ Business/Accounting □ Social Media □ Web Design □ Child care experience  
□ Other  __________  

Please mark down the times you can potentially work for each day listed below:  
Monday     __________  Tuesday     __________  Wednesday     __________  Thursday     __________  
Friday     __________  Saturday     __________  Sunday     __________  

Do you have a valid driver’s license? □ Yes □ No  
Will you have a car? □ Yes □ No  
Are you willing to carpool? □ Yes □ No  

I understand that if offered Federal Work Study for the summer term it may not carry over to the fall term and that I may only hold one job processed by the WCU Payroll Office.  

________________________________________  __________________________  
Student’s Signature  Date