FEDERAL WORK-STUDY REQUEST FORM 2017-2018
University Office of Scholarships and Financial Aid
201 South 1460 East, Room 105
Salt Lake City, Utah, 84112-9055 (801) 581-6211; FAX (801) 585-6350

STUDENT NAME: ________________________________  STUDENT ID: ____________________

SECTION I:  FWS Request
Indicate the amount requested (see instructions): $00

Instructions:
1) If this is an initial award for the Spring Semester, request the maximum amount you are willing to accept. Enter any amount between $1,500 and $2,500.
2) If requesting an increase to your existing award, enter only the additional amount you are requesting.
3) If you have questions regarding the amount to request, please contact the University Office of Scholarships and Financial Aid at 801-581-6211.

Please Note: If you request more than your eligibility allows, work-study will be awarded only to your maximum eligibility.

SECTION II:  Reason For Request: Check The Applicable Reason Or Reasons For The Request
Request for an initial work-study award:
☐ I worked as a work-study student during the previous academic year and would like to continue in that position.
☐ I have been offered a work-study position, but my employment is contingent upon obtaining a work-study award.
☐ I had an award previously, but it was cancelled.
☐ I have seen advertisements for work-study positions and would like to be a part of the work-study program.
☐ Other (please explain): ________________________________

Request for an increase in work-study award:
☐ I am close to running out of work-study funding and will not be able to finish the academic year in my work-study position.
☐ I am attending Summer Semester.
☐ Other (please explain): ________________________________

SECTION III:  By Submitting this form you agree to
• Read and understand all requirements pertaining to the awards that you have been offered.
• Notify the University Office of Scholarships and Financial Aid if any information regarding your eligibility changes.
• Provide any additional information, which may be requested of you, as processing of your file continues. Specific communications regarding your work-study status will be sent to your UMail account.
• Be issued a valid JRN by the later of September 30th or 45 days from the date that your work-study award is offered and understand that not doing so will result in the loss of the award.
• Begin work during the first 30 days of the JRN authorization period. Not doing so will void the JRN and may result in the loss of the award.
• Consistently work in your work-study position and submit those hours. Understand that the remainder of a work-study award will be cancelled if there is no record of work-study earnings for a period of 4 consecutive pay periods.
• Requests are processed based on student eligibility and the availability of current work-study funding. Completing this form does not guarantee that a student will be awarded work-study funding.

STUDENT SIGNATURE: ________________________________  DATE: ____________________

***This form will not be processed until after your financial aid file is complete and your award letter has been submitted***