



FIVE TOWNS COLLEGE

| |
|---------------------------|
| For Career Services only: |
| _____ Application |
| _____ FWS |
| _____ IWS |

FEDERAL WORK- STUDY APPLICATION

Through the Federal Work-Study Program (FWS), matriculated students with financial need may be eligible to work part-time to earn funds for their education. The award amount is based on such things as the student's financial need, the availability of funds to the college and the current pay rate.

FWS funds and employment opportunities are limited. Applications must be completed and returned to the Office of Financial Aid no later than August 1. Follow the steps outlined below to apply.

Step 1: Enter Student Information (Print information clearly)

| | | |
|-------------------------|----------------------|-----------------|
| Name: _____ | Date: _____ | |
| FTC ID#: _____ | Academic Year: _____ | |
| Address: _____ | | |
| City: _____ | State: _____ | Zip Code: _____ |
| Phone/Cell Phone: _____ | E-mail: _____ | |
| Major: _____ | Concentration: _____ | |

Step 2: Read the regulations and statement below. Provide signature and date.

FIVE TOWNS COLLEGE FWS REGULATIONS

- 1) A new application must be completed each academic year and submitted to the Financial Aid Office.
- 2) Students may work up to 20 hours per week. Written approval from the Provost is required for more than 20 hours per week.
- 3) Students in the FWS program must maintain a minimum cumulative 2.5 GPA.
- 4) Students must meet specific job hiring requirement, maintain satisfactory work performance, and a professional demeanor.
- 5) To receive payments, completed and signed Time Verification forms are due to Payroll on the 9th & 24th of each month.

- I have read and understand the Five Towns College Regulations for FWS.
- I understand that I will not be paid for any hours I work in excess of my eligibility limit unless otherwise stated in writing by the Provost of the college.
- I hereby certify the facts set forth in the above application are true and complete to the best of my knowledge.
- I understand, if employed, falsified statements on this application shall be considered sufficient cause for dismissal.

Signature of Applicant: _____ Date: _____

Step 3: Submit this form to the Financial Aid Office for determination of FWS eligibility.

| | |
|---|--|
| <i>For Office of Financial Aid Use Only:</i> | |
| FEDERAL WORK STUDY ELIGIBLE: | ___ Yes ___ No Academic Year: _____ GPA: _____ |
| IF YES, LIMIT: \$ | _____ |
| IF NO, REASON: | _____ |
| Financial Aid Signature: _____ | Date: _____ |

Step 4: Contact the Career Services Office after the first week of school to learn if your application is approved and for assistance with job counseling and placement.

Do you have transportation for off-campus employment?

YES

NO

Step 5: FWS approved and hired student brings this form to the hiring Department Supervisor. *One form to be completed for each department hiring you.

NOTE to FTC Faculty and Administration: This section is to be completed ONLY if Step 3 has been filled in and authorized.

DEPARTMENT NAME: _____

NAME OF POSITION HIRED: _____

AMOUNT OF HOURS PER WEEK: _____

**Students are NOT to exceed 20 hours per week.*

SUPERVISOR (print name): _____

SUPERVISOR'S SIGNATURE: _____ Date: ___/___/___

SUPERVISOR'S PHONE: _____

DEPARTMENT CHAIR'S SIGNATURE: _____

DEPARTMENT CHAIR (print name): _____ Date: _____

Step 6: Return completed form to Career Services for final review and processing.

Hired for FEDERAL WORK STUDY

Hired for INSTITUTIONAL WORK STUDY

Date Hired: ___/___/___

For Payroll Office Use Only:

Signature: _____ Date: _____

File # _____

Term: _____ Total Hours per week: _____

Hand Punch # _____

Salary: _____