



EMPLOYER REQUEST FOR STUDENT WORK-STUDY

S
T
U
D
E
N
T

E
M
P
L
O
Y
M
E
N
T

O
F
F
I
C
E

Please use this form if you have a student who has applied for financial aid for the current term and who did not receive a work-study award. Work-study awards are considered, based on a student's financial aid eligibility and the funds available for the work-study program at the time the request is made. If we are unable to grant the request upon receipt, it is kept on file should funds become available. If an award is granted, we will notify your department. Please contact our office at x2-7349 if you have any further questions.

Completing this form does not guarantee that the student will receive an award.

Date: _____

I am requesting work-study for the _____ academic year or _____ summer term.

Student name: _____

Student I.D. #: _____ HRMS ID #: _____

DO NOT USE THE STUDENT SOCIAL SECURITY NUMBER FOR THE STUDENT ID.

Department Name: _____

Phone #: _____ Fax #: _____

Supervisor name: _____

Supervisor e-mail: _____

Is this student currently working for your department? _____ Yes _____ No

If yes, please complete the following:

What date did they begin working for your department? _____

What is their HRMS position number? _____

Do they have hourly earnings that would need to be transferred into work-study? ___ Yes ___ No

COMMENTS: _____

I understand this letter does not guarantee the student will receive a work-study award and if the student is currently working for my department, their time must be submitted and paid as hourly (100%) earnings. EMPLOYER CANNOT HOLD HOURS!!

- Return this form to Regent Administrative Center, Room 205, mail to 77 UCB, email (stdemp@colorado.edu), or fax it to x2-4544.
- Students are notified if awarded work-study with a revised financial aid award letter and email.
- Employers are notified with an email.
- Requests are reviewed on a bi-weekly based on first come, first serve, our funding and student eligibility. We will hold the requests if not granted during a review until the student is granted an award, employer cancels requests or the term has ended.

FOR OFFICE USE ONLY:

AY (1800 or 2500):

Waitlist: Yes or No

WS Last Academic Year: Yes or No

WS Past Summer: Yes or No

Unmet Need/Offered Loans: _____

Accepted Need Based Loans: _____

Paid Loans: _____

PROBLEMS: _____

SUMMER (2000 or 2500):

(will use some AY requirements)

Periods of NonEnrollment: ____ - ____ x ____ = ____

Summer Savings: Yes or No

Enrolled in Summer: Yes or No

Enrolled in Next AY: Yes or No

FAFSA on File for next AY: Yes or No

Demonstrates Need for next AY: Yes or No

