



EMPLOYER REQUEST FOR STUDENT WORK-STUDY

STUDENT EMPLOYMENT OFFICE

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

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.

Employer name (Dept): _____

Phone #: _____ Fax #: _____ Campus Box: _____

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

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.

Supervisor Signature Date

- Return this form to UMC 100, mail it to 77 UCB or fax it to x2-4544.
- Students are notified if awarded work-study with a revised financial aid award letter.
- Employers are notified with a letter or email.

FOR OFFICE USE ONLY:

Waitlist: _____
 Academic Year: _____
 Summer: _____
 Unmet Need: _____
 Offered Loans: _____
 Awarded: _____

Colorado
 University of Colorado at Boulder