

**UNIVERSITY OF COLORADO AT BOULDER  
OFFICE OF FINANCIAL AID/STUDENT EMPLOYMENT**

**OFF-CAMPUS WORK-STUDY PROGRAM  
2007 SUMMER TERM**

Name of Agency: \_\_\_\_\_

Name of Contact Person: \_\_\_\_\_ Phone Number: \_\_\_\_\_

Please find listed below the students who are employed by your agency for the 2006-2007 academic year term. **If the student is already employed with your agency this academic year, they will not be required to stop in our office to fill out any paperwork. However, you will need to confirm below whether or not you are rehiring them and at what pay rate.**

Continuing students (students who work for your agency last summer or this academic year)  
**We will fax you an updated work-study eligibility form on each student.**

Name	SSN	Old Pay Rate	New Pay Rate	Rehire	
				Yes	No
				Yes	No
				Yes	No
				Yes	No
				Yes	No
				Yes	No
				Yes	No

New students: (students who have never worked for your agency. These students must be sent to the Student Employment Office to complete paperwork before they begin working for your agency)

Name	SSN

Please list any student who will no longer be employed with your agency

Name	SSN

\_\_\_\_\_ I have not yet hired a Work-Study student.  
 \_\_\_\_\_ I will not participate in the Work-Study Program this summer.

Please return this information to our office as soon as possible. You may mail it to University of Colorado at Boulder, Student Employment, 77 UCB, Boulder, CO 80309-0077 or you may fax it to (303) 492-4544. If you have any questions, please feel free to call us at (303) 492-3548.

Thank you!