



Federal Work-Study Application for Employment

The Federal Work Study (FWS) is a need-based, federally funded work program designed to help students meet the cost of education. To apply for FWS, you must have completed your FAFSA (Free Application for Federal Student Aid) and show financial need. The Financial Aid Office will make every effort to match a student's course of study, talents, work experience and knowledge with the supervisor's need.

Last Name	First Name	Middle Int.	Date of Birth	Colleague ID#
Address (PO Box or Street)				
City			State	Zip Code
Phone #	Cell Phone #	E-mail Address		

Academic Major	Anticipated Graduation Date:
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Please list work study areas of interest by order of preference.
1.
2.
3.
4.

Please list relevant skills and qualifications:
If a job requires specific courses, indicate those courses taken.

General: Have you ever worked in a Work-Study Job before? Yes No

If yes, what department: _____

Degree: Have you previously graduated from WPCC? Yes No

If yes: Degree Earned _____ Year Graduated: _____

Transportation: Do you have your own transportation? Yes No

Off-Campus: Are you interested in off-campus Work-Study Jobs? Yes No

Commitment: Will you commit to a minimum of ten hours per week? Yes No

Legal: Have you ever been convicted of a felony offense? Yes No

If yes, please explain: _____

Please list previous jobs (on and off-campus) with most recent job first:

Name of Employer	Position Title	Supervisor
Address		Telephone
Dates Employed	Summary of Duties	

Name of Employer	Position Title	Supervisor
Address		Telephone
Dates Employed	Summary of Duties	

Name of Employer	Position Title	Supervisor
Address		Telephone
Dates Employed	Summary of Duties	

Please list two references. You may list previous employers or on-campus references that know you well (i.e. instructors, advisors, etc.)		
Name	Position/Relation	Phone
Name	Position/Relation	Phone

Certification: All applicants must sign this form. By signing this form, you are stating that all above information is true and to the best of your knowledge correct. Additionally, I authorize Western Piedmont Community College to contact my references.

Signature: _____ Date: _____

For Financial Aid Office Use Only	
<ul style="list-style-type: none"> <input type="checkbox"/> PELL _____ <input type="checkbox"/> NCCCG _____ <input type="checkbox"/> FSEOG _____ <input type="checkbox"/> NCSIG _____ <input type="checkbox"/> SCHSHP _____ <input type="checkbox"/> LOANS _____ <input type="checkbox"/> WIA _____ <input type="checkbox"/> OTHER _____ 	<ul style="list-style-type: none"> <input type="checkbox"/> Verified eligibility <input type="checkbox"/> Referred for interview with _____ Department _____ <input type="checkbox"/> NC-4, W-4 and I-9 completed <input type="checkbox"/> Timesheet given to student <input type="checkbox"/> Work-Study handbook given to student <input type="checkbox"/> Contract/Withholdings to BO <input type="checkbox"/> Date Completed _____