FEDERAL WORK-STUDY EMPLOYMENT APPLICATION

DEADLINE MAY 29th

Please complete the following application if you are interested in working 10-25 hours per week on campus beginning in August. To be eligible to apply, you must have:

1. Completed the FAFSA by March 2nd
2. Must have financial need
3. Must be making satisfactory academic progress([http://www.marin.edu/WORD-PPT/1415SAP.pdf](http://www.marin.edu/WORD-PPT/1415SAP.pdf))
4. Must be enrolled for six or more credits

Please submit this application to the Enrollment Services Office at either Kentfield or Indian Valley.

You will be contacted by phone in early August for an interview if you are selected. Email address: [financial.aid@marin.edu](mailto:financial.aid@marin.edu) Fax # 415-460-0773
FEDERAL WORK-STUDY (FWS) EMPLOYMENT APPLICATION

Name: ___________________________ M00# ______________________________

Address: __________________________________________________________________

Phone: ___________________ Major: _______________ Fall Enrollment Plan: ____PT ____FT

What area would you be interested in working

☐ Academic Dept.  ☐ Administrative Office
☐ Athletics  ☐ Audio/Visual
☐ Drama  ☐ ESL
☐ Lab  ☐ Library
☐ Maintenance  ☐ Teaching Asst.
☐ Tutoring  ☐ No preference

By checking one or more of the boxes tells us your preference, but it doesn’t guarantee placement in that dept.

Do you have any work experience? ____ yes ___no? If yes, please list employer name, dates, and duties.

__________________________________________________________________________________________
__________________________________________________________________________________________
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I agree to meet the following conditions for federal work-study. I will:

1. Enroll in a minimum of 6 credit hours. Notify Enrollment Services if I drop below 6 credits
2. Establish a work schedule with my supervisor.
3. Complete and submit time cards to my supervisor on time.
4. Notify my supervisor in advance if I cannot work.
5. Follow all rules and procedures given to me by supervisor.
6. Perform all work assigned to me and complete it in a timely fashion.
7. Not use my own electronic devices while working.

I understand that if I do not meet all of the above conditions, I can be terminated from FWS at COM.

_____________________________  ______________________________
Signature  Date