



AN HONORS UNIVERSITY IN MARYLAND
 Office of Financial Aid and Scholarships
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 WEB: <http://financialaid.umbc.edu/>

2017-18 FEDERAL WORK-STUDY HIRE FORM

STUDENT NAME: _____ UMBC ID# _____

(PLEASE PRINT)

STUDENT CERTIFICATION

- I HAVE BEEN AWARDED FEDERAL WORK-STUDY (FWS) AND HAVE DOCUMENTED THIS AWARD TO MY PROSPECTIVE EMPLOYER TO VERIFY ELIGIBILITY.
- I CERTIFY THAT I HAVE READ AND UNDERSTAND THE CONDITIONS OF MY EMPLOYMENT LISTED IN THE STUDENT FEDERAL WORK-STUDY TERMS AND CONDITIONS.

STUDENT SIGNATURE

DATE

STUDENT EMAIL

PHONE

EMPLOYER CERTIFICATION

- I CERTIFY THAT THE STUDENT HAS A VALID FEDERAL WORK-STUDY AWARD.
- I CERTIFY THAT I HAVE READ AND UNDERSTAND THE POLICIES AND PROCEDURES AS OUTLINED IN THE EMPLOYER FEDERAL WORK-STUDY HANDBOOK.

AUTHORIZED EMPLOYER (Please print)

EMAIL

EXTENSION

POSITION HIRED FOR

HOURLY RATE

ANTICIPATED HOURS PER WEEK

AUTHORIZED EMPLOYER SIGNATURE

DEPARTMENT (Please Print)

DEPT. BUDGET RECONCILER NAME (Please print)

BUDGET RECONCILER'S EMAIL

THIS STUDENT IS NOT CERTIFIED TO EARN FWS FUNDS UNTIL THIS BOX IS COMPLETED BY THE OFFICE OF FINANCIAL AID AND RETURNED TO THE EMPLOYER.

FINANCIAL AID OFFICE USE ONLY:

AUTHORIZED AWARD AMOUNT:

FALL _____ SPRING _____ TOTAL _____

VALID JOB DESCRIPTION ON FILE: YES NO

AUTHORIZED SIGNATURE: _____ DATE: _____