



Work Study Application

School Year 2020-21

Full Name: _____ Date: _____
Last First M.I.

Address: _____
Street Address Apartment/Unit #

City State ZIP Code

Phone: _____ Email: _____

COMMENTS:

I am available to work at these times (mark with an X):

	8:00 9:00	9:00 10:00	10:00 11:00	11:00 12:00	12:00 1:00	1:00 2:00	2:00 3:00	3:00 4:00	4:00 5:00	EVENINGS
Mon.										
Tues.										
Wed.										
Thurs.										
Fri.										

1 credit hour:

- 2 Hours per week
- 15-week period
- Hourly pay at \$11.67

I certify the information contained in this application is true, correct, and complete. I understand that, if employed, false statements reported on this application may be considered sufficient cause for dismissal. Y____ N____