FEDERAL WORK STUDY STUDENT CHECKLIST

STUDENT'S NAME_____
STUDENT'S SS#_____

Please read carefully and place a check mark in the box before every statement indicating you understand the information.

☐ **JOB REFERRAL FORM**

1.) A signed Job Referral Form must be completed and signed by student and supervisor(s), and submitted to the Financial Aid Office. I must also complete and attach a w4 form, IT2104 or IT2105E, I-9, Student Checklist and Confidentiality Statement. **I will not be placed** on the payroll until I submit these forms to the Financial Aid Office.

☐ **TIMESHEETS**

2.) a.) My supervisor completes my timesheet. Timesheets are for all hours worked during a payroll cycle. Timesheets are submitted to the Financial Aid Office by my supervisor. I can submit the timesheet myself **if** it is in a sealed, supervisor signed envelope. A fraudulent time sheet will be treated as a serious offense and will be dealt with accordingly.
b.) I have received a copy of the yearly payroll schedule.
c.) A timesheet received after the due date may result in a delay of that paycheck.
d.) I will keep copies of my timesheets and a record of my earnings.
e.) If I choose a Public Service Corp placement, I must follow their payroll calendar and procedures.

☐ **AWARD AMOUNT**

3.) KEEP TRACK OF MY HOURS WORKED. I understand the Federal Work Study program will not pay for any hours worked over the amount of my work study award My supervisor and I are responsible to make sure the department where I work pays for any hours worked over my work study award.

☐ **PAYMENT**

4.) I will be paid every two weeks and my check will be mailed or directly deposited into my designated account. My checks will be mailed to the address on my financial aid

application. If I move, I will notify the Financial Aid Office and Registrar's Office immediately.

☐ GENERAL INFORMATION

5.) a.) My employment starts on or after the first day of classes and I can work until I have earned the amount of my award or until the end date on the Job Referral Form, whichever comes first.
b.) I can work up to 20 hrs./wk. My work hours will be determined by mutual agreement with my supervisor.
c.) I cannot work during my scheduled class hours.
d.) I will only be paid for hours worked.
e.) **I must inform my supervisor if I will be late or absent. I must also inform my supervisor if I decide to terminate my work-study position.**
f.) I am entitled to a half hour work break after five consecutive hours of work.

6.) **If I withdraw from my classes or drop below six (6) credits, I must terminate work study position immediately.**
If I withdraw and become less than half-time, I must contact the work-study coordinator in the financial aid office and stop working.

☐ JOB BEHAVIOR

7.) a. I understand I must conduct myself in a professional and courteous manner.
b.) I must arrive on time and be ready to work.
c.) I will be cooperative and show a willingness to learn.

8.) I will complete my work thoroughly and accurately. If I do not understand what to do, I will ask questions.

9.) I will try to represent the office well. I realize I may be the first contact that a person has with the job site, and that the manner which a person is received leaves a lasting impression.

☐ QUESTIONS

10.) I can contact the Financial Aid Office with federal work study questions by calling Jeanne Campbell at (718) 997-5112.

STUDENT'S SIGNATURE_____

DATE_____