

**Urban College of Boston  
Federal Work-Study Program Application  
2018-2019 Academic Year**

*Email or drop off completed application & resume to Allison Matthews, Dean of Enrollment  
([allison.matthews@urbancollege.edu](mailto:allison.matthews@urbancollege.edu))*

<b>Full Legal Name:</b>		<b>Date:</b>	
<b>DOB:</b>	<b>Last Four SS#</b>	xxx-xx-	
<b>Mailing Address:</b>			
<b>Phone #</b>	<b>Email:</b>		

**Employment History:**

Are you currently employed?  Yes  No

If yes:

Does your current employment relate to your field of study?  Yes  No  
Will you continue this employment while enrolled at UCB?  Yes  No

**Please list your most recent or current employer:**

<b>Employment Dates:</b>	<b>Start</b>		<b>TO</b>	
<b>Employer Name:</b>				
<b>Employer Address:</b>				
<b>Supervisor Name:</b>			<b>Supervisor Phone:</b>	

Required Resume Attached:  Yes  No Do you give us permission to contact your supervisor above?  Yes  No

**UCB Academic Information:**

<b>Certificate or Degree:</b>	<input type="checkbox"/> Certificate <input type="checkbox"/> Degree	<b>UCB Major Field of Study:</b>	<input type="checkbox"/> ECE <input type="checkbox"/> GS <input type="checkbox"/> HSA
<b>*Expected Credits - Fall</b>		<b>*Expected Credits - Spring</b>	
I confirm that I have submitted my 2018-2019 FAFSA.		Yes** <input type="checkbox"/> (**Submitting the 2018-2019 FAFSA is a requirement to be considered for a FWS position)	

\*Minimum of 6 credits per semester is required for Work-Study participation. If you are unsure, please see your advisor to confirm that you meet these requirements.

**Work-Study Job Interest Statement:**

<b>Hours Per Week Available</b>				<b>Work Time Preferred:</b>	<input type="checkbox"/> Morning <input type="checkbox"/> Afternoon <input checked="" type="checkbox"/> Evening
<b>Skills/Interests you have:</b>	Customer service	Yes <input type="checkbox"/>	No <input type="checkbox"/>	<b>Specific Job Applying For:</b>	<input type="checkbox"/> _____  <input type="checkbox"/> No Preference
	Computer skills	<input type="checkbox"/>	<input type="checkbox"/>		
	Organizing/filing	<input type="checkbox"/>	<input type="checkbox"/>		
	Public speaking	<input type="checkbox"/>	<input type="checkbox"/>		
	Greeting people	<input type="checkbox"/>	<input type="checkbox"/>		
	Managing money	<input type="checkbox"/>	<input type="checkbox"/>		

I understand that the contents of this application form will be used by the College in the process of offering work-study assignments and that this application must be accompanied with a current resume. I certify that all the information provided is true and complete to the best of my knowledge. This information may be shared with my work-study supervisor(s).

\_\_\_\_\_  
**Applicant's Signature**

\_\_\_\_\_  
**Date**

UCB Office Use Only

Student Is:  
 FASFA Eligible  Confirmed 6+ credits  Student Account Verified  
F/A Office  Approved  Not Eligible, Reason \_\_\_\_\_

F/A Officer Signature \_\_\_\_\_ Date \_\_\_\_\_

