Employer Application for the Federal College Work Study Program

Application period: Summer 2015

Department account number: ______________________________________________________

Employing Organization/University Dept.: ____________________________________________

Email address: _____________________________________________________________________

Billing Address (for Off-Campus Employers): __________________________________________

Person to contact for Job Interview: ________________________________________________

Person responsible for Approving Time Submitted: ______________________________________

<table>
<thead>
<tr>
<th>Immediate Supervisor</th>
<th>JOB TITLE Attach brief job description (form)</th>
<th>Number of Students Requested</th>
<th>Beginning Date of Employment</th>
<th>Ending Date of Employment</th>
<th>Recommend Wage Rate for Off-Campus</th>
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OFFICE USE ONLY

Billing: __________________________ Date Rec’d: __________________________ Empl. I.D.: __________________________
Department: _____________________________________________________________

Work Schedule is: ______ Flexible

________ Not Flexible (List Hours Required): ________________________

Job Title: ____________________________________________________________

Description of Duties: __________________________________________________

______________________________________________________________________

______________________________________________________________________

______________________________________________________________________

________________________________________________________

______________________________________________________________________

Skills Required: _________________________________________________________

______________________________________________________________________

______________________________________________________________________

______________________________________________________________________

Experience is: ______ Not Necessary

________ Preferred

________ Required Specify: _____________________________________________

______________________________________________________________________
SUPervisor Agreement

The purpose of this contract is to inform supervisors of the responsibilities incurred when hiring student employees and to ensure compliance with the applicable laws and regulations associated with the Federal Work Study Program. Please carefully read, sign, and return to the Office of Student Financial Services.

It is mutually agreed that:

1. The Department will provide employment in pre-approved jobs for students duly certified as eligible by the Office of Student Financial Services. Separate certification will be required for each program period (i.e. Academic Year/Summer). Students must be eligible for Work Study.

2. Supervisors will not hire students for work that will result in the displacement of university employees or impair existing contract for services.

3. Students may only work during the authorized time period as indicated on the Student Employment Authorization Form (SEA). Supervisors who allow their student employees to work outside of these dates are agreeing to pay the cost from their department funds.

4. Students may earn up to the amount authorized by the Office of Student Financial Services, as indicated on the SEA. Supervisors who allow their student employees to earn in excess of these limits are agreeing to pay the cost from their department funds.

5. The supervisor will clearly outline the duties of the job as well as their expectations. Supervisors should also explain the consequences for failing to meet the expectations as outlined.

6. Supervisors will establish a regular work schedule, taking into consideration the student’s class schedule. Supervisors should also discuss expectations in regards to adherence to the schedule. During the Academic Year, when classes are in session, students cannot work over twenty hours per week. If students work during a vacation or are participants in the Summer Program, they can work a maximum of forty hours per week. Supervisors who allow students to work in excess of these limits are responsible for the wages.

7. The Fair Labor Standards Act of 1938 prohibits employers from accepting voluntary services from any paid employee. Therefore, any student employed under the Federal College Work Study Program must be paid for all hours worked. Additionally, students can only be paid for hours that are actually worked. Vacation, sick, and holiday compensation is not allowed.

8. Supervisors must have direct knowledge of the hours worked and will verify that the time submitted is accurate. Should the supervisor be absent from campus, he/she must make arrangements for someone to supervise the student worker and have a backup person approve his/her time (if the supervisor does not have a backup person, they need to contact the Office of Student Financial Services to make arrangements for approval of the students time). The supervisor should notify the Office of Student Financial Services when temporary arrangements have been made.

9. If a student is injured on the job, supervisors should immediately notify the Office of Student Financial Services.

10. This Agreement will take effect upon its receipt in the Office of Student Financial Services. Students will not be authorized to work until this Agreement and the Student Employment Authorization (SEA) form have been processed. This Agreement shall supersede any and all prior Agreements between the Office of Student Financial Services and supervisors regarding the Federal Work Study Program.

___________________________________________________________________________
Signature                                Date
___________________________________________________________________________
Print Name

_____________________________________________________________
Department