FWS and RSWP Student Worker Intent to Re-Enroll Form

Student’s Printed Name: ____________________________ E-Number: __________________

Department’s Name: ____________________________________________________________

Supervisor’s Printed Name ________________________________________________________

Supervisor’s Signature____________________________________________________________

During the period May 6, 2016 through May 15, 2016, I would like to maintain employment under the Federal Work Study Program and/or the Regular Student Work Program. The time worked during this period will count toward the FWS and/or RSWP award amount for Spring 2016.

It is the student’s intention to enroll at least half time (6 credit hours) in the upcoming Summer 2016 semester or Fall 2016 semester. If at any time it is determined that the student will not be enrolling at least half time in the upcoming Summer 2016 or Fall 2016 semester, it is the student’s responsibility to (1) notify the Office of Financial Aid and (2) notify the hiring department, and (3) to cease working. It is understood that the student will no longer be eligible to maintain employment under FWS and/or RSWP during this period.

Failure to notify the Office of Financial Aid and the hiring department of any changes in the student plans could be considered a violation of ethical standards and/or fraud. The student signature below certifies that this statement has been read, understood, and agreed to.

Signature: ____________________________ Date: __________________

For Office Use Only

Enrolled Hours: ______________________

Processed By: ________________________ Date: __________________