



ESSEX COUNTY COLLEGE
OFFICE OF FINANCIAL AID
FEDERAL WORK-STUDY APPLICATION
2019-2020

DEADLINE DATE FOR THE 2019-2020 ACADEMIC YEAR IS AUGUST 15th, 2019

NOTE: *SUBMISSION OF A COMPLETED APPLICATION, EVEN BY THE DEADLINE, DOES NOT GUARANTEE PLACEMENT*

GENERAL INFORMATION

DATE: _____

ID# _____ **SSN#** _____

NAME _____
Last First M.I.

ADDRESS _____
Number Street Apt. No.

_____ City State Zip Code

_____ Date of Birth Sex Telephone Number

Email Address _____

WORK-STUDY INFORMATION

1. Major _____

2. Please indicate what semester you are applying for: Sum II () Fall () Spring () Summer I ()

3. Have you participated in the Federal Work Study program before? Yes () No ()

4. If yes, where did you work? _____ Semester _____

5. Were you ever terminated from the Federal Work Study program? Yes () No ()

6. In what department do you prefer to work? _____

7. Do you have any physical challenges that might limit your job performance? Yes () No ()

8. If yes, please explain: _____

9. Do you type? Yes () No () If yes, how many words per minute? _____ wpm.

10. Are you fluent in any languages other than English? Yes () No ()

If yes, please list: _____

11. Please list any skills, hobbies, and interests you have that will be helpful in placing you in the proper job (i.e., filing, computers, adding machines, etc.).

**EMPLOYMENT HISTORY
(Begin with the most recent employer)**

Company	Job Title	Job Responsibilities

12. In case of an emergency, please contact: _____
Name

_____ Address Telephone

I certify that the entries above are true and accurate statements. I understand that any omissions or false statements on this application will constitute reason for dismissal.

13. **Applicant's Signature** _____ Date _____

Affirmative Action Policy Statement

It is the policy of Essex County College not to discriminate on the basis of race, creed, color, religion, national origin, age, sex, physical handicap or marital status in its educational programs, activities or employment. Further, the College agrees to adhere to all federal and state statutes, orders, regulations, and guidelines concerning equal opportunities.

- For Office Use Only -

	SUMMER II	FALL	SPRING	SUMMER I
<i>UNMET NEED</i>				
<i>DOCUMENTS REVIEWED</i>				
<i>SAP CODE</i>				
<i>FALL OR SPRING REGISTRATION</i>				

Comments: _____

Workshop Attendance: _____