



Office of Financial Aid & Scholarships
 Cal Poly Pomona
 3801 W. Temple Ave.
 Pomona, CA 91768-4008
 (909) 869-3700 Phone
 (909) 869-4757 FAX



**2023 – 2024
 FEDERAL WORK STUDY EMPLOYMENT AGREEMENT (Academic Year)**

A: Student Information Section: Student must complete all fields.

Student Name: _____ Bronco Number: _____

FWS Award Allocation per semester: Fall \$ _____ Spring \$ _____

Student's Signature: _____ Date: _____

B: Supervisor Section: Complete this section if you wish to hire this student for 2023-24 academic year and submit hiring form to Lupe Linares at glinares@cpp.edu for processing. The student may begin work once student receives confirmation email from HR Customer Service.

Student Job Title: _____ Effective Date: _____ Handshake #: _____

Name of Employer/Department: _____ Rehire Pay Rate: \$ _____

Address: _____ City: _____ Zip Code: _____ Position No. 0000 _____

Department Contact: _____ Phone: _____

Contact Bronco Number: _____ Email: _____

Does this position require **grading, tutoring or instruction** for the majority of the hours worked? Yes No

If yes, an **Instructional Student Assistant Offer form** must accompany this Federal Work Study Agreement

C: Job Description/Duties

understand that the student above cannot begin to work until all employment documentation has been submitted to Human Resources. If the student is not eligible for work-study, or exceeds their award amount, the employer will be responsible for 100% of the student's wages.

HEERA Manager Signature: _____ Date: _____
 (Supervisor signature for off-Campus Employers)

D: For Offices Only

Financial Aid: Signature: _____

Student Empl/HR: Signature: _____

Payroll Services: Signature: _____

Visit us online at <http://www.cpp.edu/~financial-aid>