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2018-2019 Request for Federal Work Study

tudent Name: ID:		ID:
I would like to request Federal Work Stud	dy (FWS) for:	
Fall term 2018	Spring term 2019	Summer term 2019
Indicate your expected graduation date ((month and year):	<u>-</u>
Please check the box if you have read an	d understand the following:	
I understand that I am require College Financial Aid web site	ed to read the FWS student handbo	ook available on the Union County
I must be awarded FWS as pa	rt of my financial aid package befo	re starting a work assignment.
I am responsible for keeping t FWS award.	track of my cumulative FWS earnin	gs and my earnings may not exceed the
	-	when classes are in session and not t be enrolled in at least 6 credits to
NOTE: Computer generated signatures are	e not acceptable.	
Supervisor's Name:		Department:
Supervisor's email address:		
Student's signature:		Date:

No federal, state, or institutional financial aid will be awarded to you until the verification process is complete.

Union County College does not discriminate and prohibits discrimination, as required by state and/or federal law, in all programs and activities, including employment and access to its career and technical programs.

Union County College is accredited by The Middle States Commission on Higher Education. http://ucc.financialaidtv.com/

Financial Aid Office - financialaid@ucc.edu

CRI: FC18FWSR: FWS Request Form