



# Work Study Authorization Form

## Section I - Student Information

*Students may begin working once officially hired and pay earned prior to a work study award.*

Students: Do NOT complete this form until you have been offered a job. Students may complete this section. Employers generally should complete the rest of this form.

Student's name: \_\_\_\_\_ Student ID #: \_\_\_\_\_

Student's position title: \_\_\_\_\_

## Section II - Student Awarding Request

*Please select ONE estimated award amount based on student's anticipated workload for the semester. Increase requests can be completed later if needed and if work study funds remain. Annual award amounts are awarded evenly over the entire academic year. For example, \$10,000 is awarded annually (\$5,000 each semester) for a student estimated to work 100%.*

Students: Selecting this box allows the Student Employment office to reduce or cancel student loans on your behalf to make space in your financial aid package (known as COA) for a work study award.

If not selected and you do not have space in your financial aid package, you may be denied a work study award.

*\*NOTE: award amounts must be selected.* To learn more about Cost of Attendance (COA), click [HERE](#).

By checking this box, I (the student) authorize the reduction or cancellation of federal student loans that are offered or accepted to accommodate this work study award. I understand that this may create a balance that I am responsible for paying on my student account.

## Section III – Employer Information

Employing Department/Agency Name: \_\_\_\_\_

Supervisors Name (If need to be covered by the department. By providing your speedtype does not automatically mean you will be charged.)

Contact e-mail address:

Campus Box (if applicable): \_\_\_\_\_

\*Student's Start Date: \_\_\_\_\_

\*Speed Type:

(Required)



## Section IV – Signatures

**By signing this form, the student certifies that all information reported is correct and understands their responsibilities as an employee and recipient of a work study award as set forth in the [Federal Student Aid Handbook](#) and the [Student Employment Handbook](#).**

Student Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**By signing this form, the supervisor authorizes that they are familiar with, and will abide by the policies and procedures set forth in the [Student Employment Handbook](#).**

Supervisor Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**Students can upload forms to Secure Document Upload on the**

**Financial Aid website or use this QR code**

**OR**

**Anyone can email completed form to Student Employment Office**



### Student Employment Office

P.O. Box 173364, Campus Box 125 Denver, CO 80217-336

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