



Silver Lake  
College

# FEDERAL WORK STUDY (FWS) AUTHORIZATION FORM 2010-2011

You must submit this completed Authorization Form with all signatures to your FWS Job Supervisor prior to your first day of work for the 2010-2011 award year (June 13, 2010 through June 11, 2011).

The Supervisor will submit a copy to the FWS Coordinator.

Please call the Student Services Office at (920) 686-6192 with any questions about jobs; call the Office of Financial Aid at (920) 686-6122 with any questions about FWS eligibility.

NAME: \_\_\_\_\_  
LAST NAME FIRST NAME MIDDLE NAME

SCHOOL ADDRESS: \_\_\_\_\_  
LOCAL ADDRESS - STREET, CITY, STATE, ZIP PHONE

HOME ADDRESS: \_\_\_\_\_  
PERMANENT ADDRESS - IF DIFFERENT FROM ABOVE - STREET, CITY, STATE, ZIP PHONE

SLC EMAIL: \_\_\_\_\_ @CMS.SL.EDU  
EMAIL ADDRESS - SAMPLE: STUD1234@CMS.SL.EDU CELL PHONE

HOME EMAIL: \_\_\_\_\_  
EMAIL ADDRESS - SAMPLE: LAKER@YAHOO.COM

**OFFICE OF FINANCIAL AID – Room 245**

FEDERAL WORK STUDY ELIGIBILITY: \$ \_\_\_\_\_

FINANCIAL AID STAFF SIGNATURE: \_\_\_\_\_ DATE: \_\_\_\_\_

**STUDENT SERVICES OFFICE – Room 136**

FWS JOB APPLICATION HAS BEEN COMPLETED: ✓

FWS COORDINATOR SIGNATURE: \_\_\_\_\_ DATE: \_\_\_\_\_

**FINANCE (PAYROLL) OFFICE – Room 203**

PAYROLL FORMS HAVE BEEN COMPLETED: ✓

FINANCE OFFICE STAFF SIGNATURE: \_\_\_\_\_ DATE: \_\_\_\_\_

**FWS JOB SUPERVISOR**

FWS JOB SUPERVISOR SIGNATURE: \_\_\_\_\_ DATE: \_\_\_\_\_

DEPARTMENT NAME AND PHONE # : \_\_\_\_\_

**EMERGENCY CONTACT INFORMATION PROVIDED BY STUDENT**

In case of emergency, please contact:

NAME: \_\_\_\_\_ PHONE

RELATIONSHIP TO STUDENT: \_\_\_\_\_ CELL PHONE