SAINT PETER'S COLLEGE
WORK-STUDY APPLICATION
2009-2010 ACADEMIC YEAR

PLEASE PRINT **SPC ATHLETE YES or NO**

Name: _____Date of Birth_____

Address_____
Street City State Zip Code County

Social Security #:_____Telephone #:_____

AMOUNT OF AWARD **$2000.00** PERIOD OFAWARD: **2008-2009**

Major Field of Study : _____

Class Level: Freshman_____ Sophomore_____ Junior_____ Senior_____ Grad_____

Previous participation in Saint Peter's College Work Study Program ____ Yes ____No If yes, List Department/Agency _____

Other work experience:_____

List Office Skills, Talents, Interests, Hobbies, etc.,:_____

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I hereby apply for employment under the terms of Part C Title IV of the Economic Opportunity Act of 1964 to assist in the payment of my educational expenses.

I realize that the completion of this application does not automatically guarantee employment in the Federal Work-Study Program.

I am aware of the opportunity to work in a nonprofit community-service position and if granted employment under the Federal Work-Study Program, I hereby certify that:

1. I am in need of the earnings from such employment in order to pursue my course of studies at Saint Peter's College.

2. I will be a full-time student during the academic year 20_____ to 20_____.
   Or
   I will be a halftime student during the academic year 20_____ to 20_____.

3. I hereby certify that the information submitted herewith is true and correct to the best of my knowledge.

_____
SIGNATURE OF STUDENT DATE