

Office of Student Financial Aid (OSFA)

Mike Loya Academic Services Building, Room 204 500 W. University Avenue El Paso, Texas 79968 PH: (915)747-5204; FAX (915)747-56315631

2023-2024 FEDERAL WORK-STUDY (FWS) STUDENT ELIGIBILITY APPLICATION

Please print: STUDENT NAME (LAST)	(FIRST)	(MI)
LOCAL ADDRESS		
UTEP EMAIL		
This form should be completed by:		
 students that have NOT already been away the student may have already received or 	rded Federal Work-Study in the 2023-2	2024 award notification
2) students who are requesting a review of fin Work-Study Program for 2023-2024.	nancial aid to determine eligibility to pa	articipate in the Federal
The information provided by this application wi determining your eligibility for a Federal Work-Stothe available position(s) at Handshake , UTEP	Study award. If approved, students will	` '
Major:		
Classification: FR SO JR SI	R GRAD	
Please select what semester(s) you are interested	d in being awarded Federal Work-Study (i	feligible) – check all:
Semesters that apply: Fall 2023	Spring 2024 Summer 2024	
Do you plan to utilize a Consortium Agreement?	Yes No	
*Note: If you plan to use or have a Consortium.	Agreement, you are ineligible for Federal W	ork-Study.
Student's Signature:	Date:	
office of Student Financial Aid Use Only: Do <u>NOT</u> writ	te below this line.	
leeting SAP:	Enrolled: FallSpring_	Summer
Comments:		
mount Awarded:		

Revised August 2023