



California State University, Sacramento
 Financial Aid Office, Lassen Hall 1006
 6000 J Street, Sacramento, CA 95819-6044
 Phone: (916) 278-6554
 FAX: (916) 278-6082

Print Name: _____
Sac State ID #: <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>

FEDERAL WORK-STUDY (FWS) REQUEST FORM

You may submit this form to the Financial Aid Office to request an FWS award. We will offer you FWS if you are eligible and there are funds available in the program. If you are eligible and there are no FWS funds available, you will be placed on a waiting list. If you have been offered loans, they may be reduced or cancelled in order to offer you FWS.

An FWS offer does not guarantee you a job. If you receive FWS and do not find FWS employment within 30 days from the date of the offer, it may be cancelled.

Your FWS request will be reviewed in July, and it can take up until October and after to be notified of an FWS offer. If you have been offered FWS, you will be notified through your My Sac State Student Center with further instructions. Please complete the following:

1. Student email: _____
2. Student phone number: _____
3. If you are requesting FWS to return to a previous FWS job **or** have been offered a FWS job, provide the following:
 - a. FWS Employer/Department: _____
 - b. FWS Supervisor's Name: _____
 - c. FWS Supervisor's Phone: _____

I certify that all the information on this form is complete and correct. I understand my student loans may be reduced or cancelled in order to receive a FWS offer. I understand not all FWS requests can be made due to limited FWS funding.

Student Signature: _____ Date: _____