Federal Work- Study Student Hiring F orm

Complete this form when a Federal Work-Study Student is hired

Preparer Name:
Preparer Email and Extension:
Department Name:
Department Organization number:
Student Job Title:
Student Name:
Stud ent Campus- Wide Identification Number (CWID) :
Agency Name: Illinois Institute of Technology
Agency Address: 10 W. 35th Street, Chicago, IL 60616
Supervisor Name:
Supervisor email address:
Anticipated Start Date *: *students may not begin working until their employment documents are submitted and approved.
End Date: Typically whichever occurs first: the end of the semester, or when all FWS funds have been exhausted

FWS Contact: Andrea Watkins, Associate Director, Federal Work-Study Compliance

Return completed form to Andrea Watkins: awatkin3@iit.edu Please notify me immediately if the student ceases reporting to work, or if you have any issues or concerns with student performance.