Lincoln University
Federal Work Study
Work Authorization/Payroll Entry Form

Supervisor: _____ Department: _____

Extension: _____ Location: _____

Student's Name: _____ SSN: _____-____-_____

The aforementioned student is participating in the Federal Work Study Program. He/she has been awarded $_____ for the Fall of 200____ and $_____ for the Spring of 200____. He/she has consumed $_____ of these funds. **He/she should not exceed the total award for each given semester** (i.e. Student A has $250 for Fall and $300 for Spring. Student A should only work to earn up to $250 for the fall semester and not more). With the given award he/she is allowed to work _____ total hours in the Fall and _____ total hours in the Spring. **He/she is allowed to work a maximum of 20 hours per week.**

After interviewing the student, please complete bottom portion and return this form to the Office of Student Employment at 103 Lincoln Hall.

Employer:

_____ Hiring Student _____ ***Not*** Hiring Student

_____	_____	_____
Print Name	Signature	Date

Student will be employed as: _____ (list position here)

Start Date: _____ End Date: _____ Pay Rate: _____

Student:

_____ Accepting Offer _____ ***Not*** Accepting Offer

_____	_____	_____
Print Name	Signature	Date

The following completed documents must be on file with the Student Employment Office prior to students working:

Form W-4
Employment Eligibility Form I-9
Two Forms of Identification (driver's license, social security card, passport)
Work Authorization/Payroll Entry Form

NO STUDENT IS AUTHORIZED TO WORK UNTIL ALL DOCUMENTATION IS COMPLETED AND ON FILE IN THE STUDENT EMPLOYMENT OFFICE.
****Departments allowing students to work prior to approval by the Student Employment Office will be responsible for payment of all hours worked prior to approval***

White – Student's Copy Yellow – Supervisor's Copy Pink – Student Employment Office