Grayson County College

Office of Financial Aid Work Study Application

If you are interested in receiving College Work-Study you must:

- ☐ Complete the FAFSA @ www.fafsa.ed.gov (and if applicable)verification with the Office of Financial Aid
- ☐ Complete the College Work-Study Application
- ☐ Complete Background Investigation Authorization Form (Notarization required)

Date: _____

Year requested (Check all that apply) ☐ Fall ☐Spring ☐ Sum I ☐Sum II

Please type or print legibly:

Last Name:	First Name:	Middle Name:
Alias/Maiden Name(s)		
Student ID/Last 4 SSN#:	Drivers License #	Drivers License State:
Date of Birth: (MM/DD/YYYY)	Race: (Optional)	Sex:
List any prior STATES(s) of residence for the past ten years. *(NOTE: ONLY LIST THE STATE(s) OF RESIDENCE AFTER AGE 17)*		

1. Are you currently a work-study student? _____No _____Yes: Which department: _____

   List the department(s) you would like to work in:

   1) _____ 2)_____ 3)_____

2. What is your major? _____ What is your minor? _____

3. What is your classification? ☐Freshman ☐ Sophomore

4. Indicate your preference for work hours:

☐Weekday mornings ☐Weekday evenings ☐Weekday afternoons ☐Weekends ☐No preference

5. How many hours a week are you available to work (5 minimum to 20 maximum)_____

6. Briefly describe your skills, abilities and special interest (typing, computer, etc.)

   _____

7. Briefly describe any previous employment. (continue on back if needed)_____

   _____

8. Briefly describe any volunteer work you have done. (continue on back if needed)_____

   _____

Office Use Only

*Amount of Eligibility: $*_____ *Amount of Eligible Hours:* _____ *Start Date:* _____

Department Placed In: _____ Supervisor: _____ Ext: _____

Comments: _____

FAO Signature:_____ Date: _____