University of Central Missouri Student Financial Services P.O. Box 800 Warrensburg, MO 64093-5178

) HGH: URDUON 6WXG\ UCM use only (PSOR\PHQW (DUQLQJV \$OORW5PHTQHVW

Phone 660-543-8266 FAX 660-543-8080 Webpage: www.ucmo.edu/sfs 'RFXPHQWV 2QO\ (PDLO ILQDQFLDODVVLVWDQFH#XFPR HGX

	WSREQ
	700
Student's Name (please print)	UCM ID Number
I wish to beoffered a Federal Work-Study part-time of following academic period(s):	employment earnings allotment for the
20 Fall Se P H V W H U	
20 SpringSemester	
20 SummerSession	
. I intend to be employed in (cheatenly one):	
an oreampusposition Department/area?	
an offeampusposition through the Feder'som. Please Access your + D Q GAckoDrN (tucmo. N	, , ,
Comments/Remarks?	
I understand that aldugh I may have eligibility for federal funding may prevent 8CM 6tudent Financial Seearnings allotment.	and the control of th
Student's Signature	Date

Complete and submit this document to UCM Student Financial Services in person (1100 Ward Edwards Bldg.) or by mail (University of Central Missouri, Student Financial Services, P.O. Box 800, Warrensburg MO 64093-5178), or by fax (660-543-8080).