

FARMINGDALE STATE COLLEGE
Office of Financial Aid
Summer 2009 Federal Work Study Request Form

Name _____ SS# _____

1. I understand I must file the 2009-2010 Free Application for Federal Student Aid (FAFSA) or Renewal FAFSA so that it is received and date-stamped by the Federal Processor no later than April 1, 2009.
2. I understand this Summer Federal Work Study (FWS) Request Form must be completed and returned to the Office of Financial Aid.
3. Applications received after May 1st will be considered on a funds available basis.
4. Please circle one: Associate Degree Bachelor Degree
5. I understand I must be registered for summer classes or PRE-REGISTERED for the Fall 2009 semester in order to qualify for summer FWS.
6. I understand I am eligible to earn my summer FWS award during the summer period of employment which is 7/1/09 through 8/6/09 only.
7. I am planning to apply for a summer loan (please circle one): Yes No
8. I am planning to apply for summer TAP (please circle one): Yes No

Signature _____ Date _____

You must return this completed form to the Office of Financial Aid
Phone (631)420-2578 Fax (631)420-3662