



JAMES SPRUNT COMMUNITY COLLEGE'S 2019 - 20 FEDERAL WORK-STUDY EMPLOYMENT APPLICATION

- **PLEASE FILL OUT THE APPLICATION COMPLETELY. IF IT DOESN'T APPLY, USE "N/A".**
- For a list of available positions, please visit <https://jamesprunt.edu/financial-aid/federal-work-study-program/>.
- **RETURN COMPLETED APPLICATIONS TO: James Sprunt Community College (Financial Aid Office), Attention: Sholanda Moore, Post Office Box 398, Kenansville, NC 28349**

Name _____ Student ID# _____

Address _____
 Street (Use P.O. Box, if available) City State Zip

Email address _____ Cell Phone _____ Home phone _____

Birth Date _____ Major _____ Exp. Graduation Date _____

Have you completed a 2019-20 Free Application for Federal Student Aid (FAFSA)? Y / N	
Have you ever been a Work-Study Student at JSCC previously? Y / N	If Yes, please give the name of supervisor and the department:
Are you employed now? Y / N	
Are you on academic probation? Y / N	
Are you a member of any organizations on campus? (SGA, PTK, Scholarly Men of Success, Scholarly Women of Tomorrow, etc.) Y / N	If so, please list.
Do you or will you be receiving any Veterans Benefits or WIOA tuition assistance? Y / N	
Have you completed your developmental courses? (DMA/DRE) (Math/Reading) Y / N	
Do you have your own transportation? Y / N	
Have you ever been fired from a job? Y / N If so, why?	
Have you ever been convicted of a felony? Y / N If yes, please explain.	
Are you legally authorized to work in the US? Y / N	
Are you a veteran? Y / N	

POSITION APPLYING FOR: _____

Title of the position in which you are applying for: _____

(If for all positions, please notate "Any")

Summarize any relevant certifications, skills, and/or licenses that you have for this position:

Please list prior work experience beginning with the most recent. If you have more work experience that you would like to list, please provide on a separate sheet of paper.

1. Employer Name _____ Employer Phone Number _____

Job Title _____ Name of Supervisor _____

Pay per Hour (\$): _____

Dates of Employment

Begin Date _____ End Date _____

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Job Duties

Reason for Leaving: _____

May we contact this employer as a reference? Y / N

2. Employer Name _____ Employer Phone Number _____

Job Title _____ Name of Supervisor _____

Pay per Hour (\$): _____

Dates of Employment

Begin Date _____ End Date _____

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Job Duties

Reason for Leaving: _____

May we contact this employer as a reference? Y / N

POSITION APPLYING FOR: _____

3. Employer Name _____ Employer Phone Number _____

Job Title _____ Name of Supervisor _____

Pay per Hour (\$): _____

Dates of Employment

Begin Date _____ End Date _____
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Job Duties

Reason for Leaving: _____

May we contact this employer as a reference? Y / N

References

List references that are not relatives or former supervisors.

Name _____ Phone Number _____ Personal / Professional

Name _____ Phone Number _____ Personal / Professional

Name _____ Phone Number _____ Personal / Professional

Emergency Contact

(Contact in case of accident or illness)

Name _____ Phone Number _____ Relationship _____

Name _____ Phone Number _____ Relationship _____

POSITION APPLYING FOR: _____

If I am hired as a Work-Study Student, I understand that:

- I cannot earn more than my award amount.
 - I will not be scheduled to work more than my designated hours a week.
 - I will not be allowed to work during my classes.
 - I must notify my supervisor if I am unable to work at my scheduled time.
 - I cannot work on class assignments or projects during scheduled work hours unless approved by my supervisor.
 - I must maintain a 2.0 GPA and enrollment requirements for eligibility.
 - I may be dismissed for refusing to work, not showing up during my scheduled time, punctuality problems, performance problems, or creating a disturbance within the office.
 - Due to FERPA laws, student's privacy and confidentiality are extremely important and must be upheld.
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* **By checking this box, I certify that I have read and understand the information provided with the online federal work-study application.**

Signature of Applicant: _____ Date: _____

Any falsification on this application may be grounds for dismissal.

James Sprunt Community College is an equal opportunity educational institution and employer. The college does not practice or condone discrimination in any form against students, employees, or applicants on the grounds of race, color, national origin, religion, sex, age, disability, or political affiliation consistent with those laws which affect the institution.

(FOR FINANCIAL AID OFFICE USE ONLY)

Financial Need _____ DEPARTMENT _____

AMT _____ HOURS _____ ACADEMIC PROGRESS _____

COMMENTS _____