



Urban College of Boston

A TWO-YEAR COLLEGE CHARTERED IN 1993
 178 Tremont Street, Boston, MA 02111
 617-449-7439 www.urbancollege.edu

WORK-STUDY APPLICATION 2017-2018 Academic Year

****Applicant MUST be FASFA Eligible in the Current Academic Year**

Full Legal Name:		Date:	
DOB:		Last Four SS#	xxx-xx-
Mailing Address			
Phone #		Email:	

Employment History:

Are you currently employed? Yes No

If yes:

Is your current employee related to your field of study? Yes No

Will you continue this employment while enrolled at UCB? Yes No

Please list your past two employers:

Employment Dates:	Start		TO	
Employer Name:				
Employer Address:				
Supervisor Name:		Supervisor Phone:		

Required Resume Attached: Yes No Do you give us permission to contact your supervisor above? Yes No

UCB Academic Information:

**Certificate or Degree:	<input type="checkbox"/> Certificate <input type="checkbox"/> Degree	**UCB Major Field of Study:	<input type="checkbox"/> GS <input type="checkbox"/> ECE <input type="checkbox"/> HUS
*Expected Credits – Fall 2016		*Expected Credits – Spring 2017	

*minimum of 6 credits per semester is required for Work-Study participation ** if you are unsure, please see your advisor to confirm you meet these requirements

Work Study Job Interest Statement:

Hours Per Week Available			Work Time Preferred:	<input type="checkbox"/> Afternoon <input type="checkbox"/> Evening
Skills/Interests You Have:	Typing	Yes <input type="checkbox"/>	No <input type="checkbox"/>	Specific Job Applying For: <input type="checkbox"/> _____ <input type="checkbox"/> No Preference
	Filing	<input type="checkbox"/>	<input type="checkbox"/>	
	Scan/Copy	<input type="checkbox"/>	<input type="checkbox"/>	
	Accounting	<input type="checkbox"/>	<input type="checkbox"/>	
	Tutoring	<input type="checkbox"/>	<input type="checkbox"/>	
	Childcare	<input type="checkbox"/>	<input type="checkbox"/>	

I understand that the contents of this application form will be used by the college in the process of offering work-study assignments and that this application must be accompanied with a current resume. All the information provided is true and complete to the best of my knowledge. This information may be shared with the financial aid office and my work-study supervisor(s).

Applicant's Signature

Date

UCB Office Use Only

Student Is:

FASFA Eligible Confirmed 6+ credits Student Account Verified

F/A Office Approved Not Eligible, Reason _____

F/A Officer Signature _____ Date _____