



Community & Technical College
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Student Financial Aid Office
121 Oswald Bldg / 470 Cooper Dr.
Lexington, KY 40506-0235
859-246-6300 phone
859-246-4698 fax

Federal Work-Study Request

Information obtained from your 2008-2009 Free Application for Federal Student Aid (FAFSA) indicated that you were interested in the Federal Work Study Program. Federal Work-Study provides you an opportunity to work and earn money to help with your educational expenses. As a Federal Work-Study participant you may work on-campus or off-campus. If you choose to work on-campus your rate of pay will be \$7.00 per hour. If you choose to work off campus, at an approved Federal Work-Study job site, your rate of pay will be \$8.00 per hour.

If you wish to participate in the Federal Work-Study program for the 2008-2009 academic year, please complete the information below and return this form to the BCTC Financial Aid Office by **August 01, 2008**. After receiving your request the Financial Aid Office will process your eligibility and forward you additional information regarding Federal Work-Study. Federal Work-Study funds are limited and awarded on a "first come first served" bases. Once funds have been exhausted no additional awards will be awarded. If you have any questions regarding your financial aid please contact the Financial Aid Office at 859-246-6300.

Student's Name: _____ SSN/PSID: _____

How many hour per week you wish to work: 20 – 15 14 - 10 less than 10

If needed, do you want your Federal Student Loan reduced to award Federal Work-Study.

NO YES

Have you previously participated in the Federal Work-Study program? .

NO YES If yes when did you work (i.e. 2007 Fall) _____

STUDENT CERTIFICATION: *I wish to participate in the Federal Work-Study program. I understand that the Financial Aid Office reserves the right on behalf of BCTC and criteria established by the U.S. Department of Education to review, change and cancel an award at any time because of changes in financial and/or academic status. If I purposely give false or misleading information on any financial aid documents, I may be fined, sentenced to jail or both.*

Signature: _____ Date: _____

**Return complete form to: Financial Aid Office
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