



8. Number of Work-Study students requested: \_\_\_\_\_

9. Indicate quarter/s for which you are applying for student assistance:

Summer       Fall       Winter       Spring

10. Suggested hourly pay rate (must meet State Minimum of \$8/hr): \$ \_\_\_\_\_

11. Description of proposed duties for student employees: Attach additional page if needed

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12. Work location: \_\_\_\_\_

13. What academic/educational major is relevant to this position? \_\_\_\_\_

14. Describe supervision given student/s by the Business/Organization, including the name and title of the supervisor:

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I certify that the information given on this application is true and correct to the best of my knowledge, that the Business described herein is for profit, or that the Organization described herein is non-profit, and that any student worker/s provided by the University of California in connection herewith will not be permitted to engage in any form of political activity in their employment under this program.

Business/Organization Officer:

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Name (please type or print)

\_\_\_\_\_  
Title

**Return to:** Financial Aid & Scholarships  
Work Study  
University of California  
One Shields Ave.  
Davis, CA 95616-8596