What is the Summer Federal Work-Study Program?

The Summer Federal Work-Study program provides students who demonstrate financial need with an opportunity to work during the summer. These funds are intended to assist you with educationally related expenses for the upcoming 2018-2019 academic year. Eligibility is determined using information from your 2017-2018 Free Application for Federal Student Aid (FAFSA).

What requirements must I meet to be eligible for Summer Federal Work-Study?

You can apply for the Summer Federal Work-Study program if you meet the following requirements:

1. **Enrollment** (you must meet one of the following):
   a. You are enrolled at least half-time for Summer 2018
      Undergraduate students = 6 credits
      Graduate students = 3 credits
   b. You are enrolled at least half-time for fall 2018

2. You must submit a 2017-18 and 2018-19 FAFSA at www.fafsa.gov if you have not already done so. You must also provide any supporting documents to the Office of Student Financial Aid upon request.

3. Complete the application on the reverse and return it to the Office of Student Employment.

Where can I work?

- Any department on-campus

- Job listings are available on-line at:
  www.umaine.edu/studemp

Do I have to enroll for summer in order to receive Summer Federal Work-Study?

You do not need to be enrolled for summer in order to be considered for Summer Federal Work-Study. However, if you are not enrolled for summer, you must be enrolled at least half-time for fall in order to be eligible. Please note that if you are enrolled less than half-time for summer, your financial aid for 2018-2019 may be impacted.
2018 Summer Federal Work-Study Application

APPLICATION DEADLINE: APRIL 7, 2018

Please note: You will be notified via email if you are awarded Summer Federal Work-Study.

Name (please print) ________________________________ Mainestreet ID # __________________


Address before 5/1/18
________________________________________________________ Phone No: ______________________

Address after 5/1/18
________________________________________________________ Phone No: ______________________

Please give the following employer information:

UMaine Hiring Department Name: ________________________________ Phone No: ______________________

Supervisor Name __________________________________________ Phone No: ______________________

Campus Address: ____________________________________________

Job Title: __________________________________________________

Beginning Date of Employment___________________ End Date of Employment____________________

Please read the following statements, then sign and date the application:

• I have read the reverse of this form and understand the eligibility criteria, including the necessity for submission of all required forms.

Student Signature __________________________________________ Date ______________________

FOR OFFICE USE ONLY:

Date Received: __________ 2017-2018 EFC ________ 2018-2019 EFC ________ Dep. Status________

App. Stat/Comments: __________________________________________ Award amount: ______________________

Enrollment: Summer 2018____ Fall 2018______ Department hired: ________________________________

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