Federal Work-Study Appeal

Please be aware that submitting this appeal does not guarantee admittance into the program or an increase in your FWS award. All decisions are rendered on a case by case basis, taking into consideration student eligibility as well as the availability of program funds. You will receive an e-mail notification within two weeks regarding the outcome of your appeal. If you have any questions or need additional information regarding this appeal or the FWS program, please contact our office at fws-admin@umd.edu or 301-314-5302.

Student Information

Name: _______________________________________   U ID: __________________________________
Local Phone #: ________________________________   Major: ___________________________________
Local Street Address: ___________________________________________________________________
City, State, Zip Code: ___________________________________________________________________
E-Mail Address: ____________________________________________________ ____________________

Appeal for Federal Work-Study Funds

Please consider me for a(n): ___________________________________________________________________

For which Term and Year are you requesting funding?

____New Award   ____Increase to Current Award   _____Fall______Spring Year___________

If you are requesting a new award, have you identified a potential employer?

____Yes   ____No

If yes, which employer? __________________ Have you worked for this employer previously?________

If you are requesting an increase to an award, please supply the following:

Hours worked per week: ___________________________
Hourly Wage: ___________________________
Employer: ___________________________

Reason for Appeal: _________________________________________________________________
________________________________________________________________________________
________________________________________________________________________________
________________________________________________________________________________
________________________________________________________________________________
________________________________________________________________________________

Student Signature: _______________________________________________  Date: __________________

fws-admin@umd.edu
301-314-5302