FEDERAL WORK STUDY PROGRAM FWS STUDENT RIGHTS AND RESPONSIBILITY STATEMENT

Student	Student Name:				
	Last	First	MI		
<u>emplid</u>	#:				
of your r permane	ights and responsibilities as a parti	icipant in the FWS program. fully and check " $$ " each ite	nation contained in this document. This is a con a. The original copy of this form will be kept in ye tem. If you do not understand any item, the FW	our	
1	The FWS program award is not a worked.	grant and must be earned b	by working. I will be paid only for the hours that	t I have	
2			ny award to another student. FWS awards do n my full award by the "last day to work", the bala		
3			r to the placement date on my FWS Student/Em rs worked after the "last day to work", or after I h		
4			Student/Employer Acknowledgments. The FW nyone other than the FWS Coordinator.	IS	
5	I understand that I cannot work d supervisor for the fall and spring		es. A copy of my class schedule is to be given	to my	
6	I must contact my FWS supervise	or/alternate if I am not repor	rting to work or going to be late.		
7	open, with the supervisor presen	it, and must be indicated on	ficially closed, a clear notation stating that the or the FWS time sheet with my FWS supervisor a Il be deducted from the FWS time sheet		
8	My pay rate will remain the same	e for the entire period of the	FWS Student/Employer Acknowledgments.		
9	My FWS payroll check cannot be	e released before the sched	duled disbursement date.		
10		register for at least 6 credits	't registered for the preceding Fall semester for for the Spring semester during the same acade Spring).		
11			e, has missing supervisor's signature, stating the ed to the supervisor unprocessed. This will dela		
12	I understand that I cannot hand Schedule as outlined.	deliver timesheets to the Of	ffice of Financial Aid. I must follow the FWS Pa	ayroll	

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13	If I elect to take a Public Service Corp. placement, I must follow their payroll calendar/schedule, policy, and procedures to receive payment on time.
14	I should keep copies of my FWS Student / Employer Acknowledgments and timesheets for at least 3 years.
15	According to the Labor <i>Law Section 511(15), State of New York</i> , a student who is enrolled and in attendance at a school and who is employed in that school is expressly excluded from coverage for purposes of unemployment insurance. However, it should be made clear that the determination of eligibility should be made by the New York State Department of Labor.
16	According to NY State Department of Social Service, <i>Administrative Directive 81 ADM-38 of August 27, 1981</i> , all Financial aid is exempt from consideration in determining financial eligibility for public or medical assistance.
17	FWS earnings will be counted when applying for food stamps.
18	I am aware that I can request direct deposit of my work-study earnings and other financial aid funds.
19	I must stop working when my enrollment drops below 6 credits, withdraw from classes, take a leave of absence, if I am dismissed from the college, or graduate. I must inform the FWS Coordinator and my FWS supervisor Immediately.
20	If I work during the Fall semester and I do not register for the following Spring semester, I cannot work beyond The last day of finals for the Fall semester. I understand that I am not eligible to work and receive payment for any hours worked during Winter Intercession.
21	If I work during intercession, FICA will be deducted from my FWS earnings as outlined in the FWS Student/Supervisor Handbook.
22	It is prohibited to use cell phones at my work site during scheduled working hours.
23	I will adhere to proper dress codes to include clean and neat appearance during scheduled working hours: males should not wear "doo rags", caps, or any offensive markings on clothing. Slacks and pants should be at waist level at all times. Females should wear clothing that are accustomed to their work place. Clothes should fit comfortably and not too revealing of any one body part.
24	In addition to the above rules and regulations for the FWS program participants, no children or visitors are allowed at any work site.

I, hereby state that I have read the above items carefully and completely. I understand my rights and responsibilities and I have received clear answers to my questions regarding the Federal Work Study Program. I also acknowledge that if my behavior is less than stellar, my supervisor has the right to discontinue my work agreement at his/her department for non-compliance.

Student's Signature

Date