



Student Employment: Additional Federal Work-Study (FWS) Job Agreement Form

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|--------------------------|--|--|--|
| Student Name: | | | |
| Student ID: | | Date: | |
| Primary FWS Position: | | | |
| Supervisor: | | | |
| Additional FWS Position: | | Is this your 2 nd or 3 rd FWS Position?: | |
| Supervisor: | | | |

Please return this form to Student Employment after all signatures are collected, in addition to the new position's Student Employment Authorization Form.

I, the **primary Federal Work-Study supervisor**, give the student named above, permission to earn their Federal Work-Study award at an additional site, understanding that this will decrease the amount of the award they can earn in my department. I also understand that it is my duty to work with the additional site(s) to ensure that the student does not work more than the number of hours Webster University allows.

Supervisor Signature _____
Date

Supervisor Print Name

I, the **additional Federal Work-Study supervisor**, understand that the above named student is currently earning Federal Work-Study within another department, and therefore will not be able to earn their full award amount within my department. I also understand that it is my duty to work with the additional site(s) to ensure that the student does not work more than the number of hours Webster University allows.

Supervisor Signature _____
Date

Supervisor Print Name