



**2008-2009**  
**IMPORTANT GRADUATE FEDERAL WORK-STUDY/  
COLLEGE WORK OPPORTUNITY INFORMATION**

Congratulations! You have been offered Graduate Federal Work-Study as part of your *Offer of Financial Assistance*. Please read the following information carefully and complete **each** of the steps in order to receive your work authorization\*.

1. Complete the enclosed *Graduate FWS/CWO Authorization Form*. You must **submit the completed Form to the USD Office of Financial Aid within THREE WEEKS** of the date of your *Offer of Financial Assistance*. Employment cannot be guaranteed for students who return the form after the deadline.
2. As a recipient of Graduate Federal Work-Study/College Work Opportunity you will be assigned your job location by Elaine Elliott from the positions available and listed at the Office of Community Service-Learning (M218). In addition you will need to pick up your *USD Student Work Referral* form at the Student Employment Center (HC 313).
3. Once hired, complete the *Referral* form with the hiring department and return it to the Student Employment Center. If you **have not** previously worked at USD, please read the description of the required employment eligibility documentation. **Bring the necessary forms with you when your job selection process is complete.**

**ALL students, entering and continuing, must pick up their *USD Student Work Referral* during September 3-24 or risk cancellation of their work offer.**

**HOURLY WAGE:** A graduate student's hourly wage rate for the FWS/CWO program is \$13.00/hr.

\*Actual authorization will be determined by each student's federal financial eligibility.

## EMPLOYMENT ELIGIBILITY VERIFICATION PROCEDURES

The Immigration Reform and Control Act requires that **all** employers in the United States verify the identification and employment eligibility of **all** employees. In compliance with this federal law, all GFWS/CWO recipients must present certain documentation to the Student Employment Center (or USD Human Resources) at the time payroll forms are completed.

To meet these requirements you must complete an Employment Eligibility Verification Form (INS form I-9) and present the documents noted on the reverse side of it. Present either one of the documents listed in List A or a document from **both** List B and List C.

**NOTE: UNDER NO CIRCUMSTANCES WILL ANYONE BE ALLOWED TO START WORK UNTIL THESE FORMS HAVE BEEN COMPLETED.**

### Forms Documenting Employment Eligibility

**List A:** **These forms establish both identity and employment eligibility:** U.S. Passport (expired or unexpired); Certificate of U.S. Citizenship; Unexpired foreign passport with valid employment authorization attached; Alien Registration card with photograph.

**OR**

**List B:** **The following documents establish identity only:** A state driver's license or identification card that has a photograph, name, date of birth, sex, height, weight, and eye color; U.S. military identification card; other photograph-bearing identification card from official organizations (these must be reviewed individually for acceptance);

**AND**

**List C:** **If one of the documents from List B is used to establish identity, one of the following documents must also be presented to establish employment eligibility:** an **original** copy of a Social Security card (unless marked "not valid for employment"); a birth certificate issued by a state, county, or municipality which bears a seal or other certification; or an unexpired INS Employment Authorization Form.

The University is required to visually inspect the original documents you are using for verification. Students who have previously worked for USD are not required to repeat this process.

**PLEASE REMEMBER:** All students receiving Graduate FWS/CWO are **required** to complete this process **before starting work.**



FOR SEC USE
Auth: _____
Avg _____
Hrs _____
Pay _____
Rate _____
Dept _____

**2008-09  
GRADUATE FWS/CWO AUTHORIZATION FORM**

Complete and return this *Graduate FWS/CWO Authorization Form* to the Office of Financial Aid, Hughes 319, **within three weeks of the date of your Offer of Financial Assistance** in order to receive employment through the Graduate FWS/CWO Program.

**PLEASE PRINT ALL INFORMATION.**

1. Name \_\_\_\_\_ USD ID # \_\_\_\_\_  
Social Security # (optional) \_\_\_\_\_
2. Permanent Address \_\_\_\_\_ Phone (\_\_\_\_) \_\_\_\_\_  
\_\_\_\_\_
3. Local Address \_\_\_\_\_ Phone (\_\_\_\_) \_\_\_\_\_  
\_\_\_\_\_
4. If you are eligible for Graduate FWS/CWO, it may impact your *Offer of Financial Assistance* by reducing or replacing loan eligibility.  
 Yes, I **do** want Graduate FWS/CWO to reduce/replace my loan eligibility.  
 No, I **do not** want Graduate FWS/CWO if it results in a reduction/replacement of a loan(s).
5. Do you require any special accommodations for employment (not including scheduling)?  
 Yes  No (If yes, please explain on the reverse side of this form.)
6. Would you be interested in working during the summer?  Yes  No
7. Have you worked on campus at USD previously?  Yes  No Where? \_\_\_\_\_

I have reviewed the steps necessary to receive my Graduate Federal Work-Study/College Work Opportunity and understand that failure to complete the process in its entirety and/or meet the deadlines outlined will result in the cancellation of my Graduate Federal Work-Study/College Work Opportunity.

Signature \_\_\_\_\_ Date \_\_\_\_\_



**University of San Diego – Community Service Work-Study Program**  
2008-2009 Application for Employment through the Graduate  
Federal Work-Study/College Work Opportunity Programs

Date \_\_\_\_\_

Name \_\_\_\_\_ USD ID# \_\_\_\_\_

Local Address \_\_\_\_\_ City \_\_\_\_\_ Zip \_\_\_\_\_

Permanent Address \_\_\_\_\_ City \_\_\_\_\_ Zip \_\_\_\_\_

Local Phone (    ) \_\_\_\_\_ Permanent Phone (    ) \_\_\_\_\_

E-mail \_\_\_\_\_ Major \_\_\_\_\_

Emergency Contact Name \_\_\_\_\_ Phone (    ) \_\_\_\_\_

Part-time [  ]      Full-time [  ]      Commuter [  ]      Resident [  ]

Do you speak a language other than English? (list) \_\_\_\_\_ How fluently? \_\_\_\_\_

***Relevant Experience***

Have you ever worked on campus? Yes [  ] No [  ] When? \_\_\_\_\_ Where? \_\_\_\_\_

Do you have knowledge of and/or experience working in a lower socio-economic community? (*describe*)

Describe your community service experience(s). Include your duties, responsibilities, and length of service.

Describe any school and/or community participation that has involved children.

Describe any science laboratory experience.

List any special skills/talents/interests you have that will help determine your community service placement.

***Employment History***

Name of Employer Phone No.	Job Title	Length	Supervisor

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

**Please return the Community Service Work-Study Program application to:**

Elaine Elliott, Director  
Center for Community Service-Learning  
University of San Diego  
5998 Alcalá Park  
San Diego, CA 92110-2492

Tel: (619) 260-4798

e-mail: [elliott@sandiego.edu](mailto:elliott@sandiego.edu)