THOMAS JEFFERSON
SCHOOL OF LAW
SAN DIEGO, CALIFORNIA

Financial Aid Office
2121 San Diego Avenue San Diego, CA 92110
Phone: (619) 297-9700 Fax: (619) 374-6397

Federal Work Study Program
Student Certification of Intent to Enroll

ATTENTION STUDENT: ***The Federal Work Study (FWS) student employment program at TJSL is designed to help you earn a portion of your college expenses while you gain valuable work experience. You may not earn more than the amount listed on your financial aid award letter and/or Student Hiring Agreement.***

Please choose the statement that applies to you. Please read and initial that you have read and understand the following:

_____ *I intend to enroll in at least 3 units at TJSL during the Summer _____ Session. Please determine my FWS eligibility based upon my enrollment in (#) _____ of units during Summer _____at TJSL.*

_____ *I understand that I may be employed under FWS during a period of nonattendance, such as a summer or equivalent vacation period. To be eligible for this employment, I must be planning to enroll for the next regular session (ie. FALL). My earnings during this period of non-attendance will be considered as financial assistance used to pay my cost of attendance for the next period of enrollment.*

Students who would like to be employed under the FWS program during a Summer Session in which they are not enrolled must agree with and write the following statement in the space provided below:

During the Summer of _____, I would like to maintain employment under the Federal Work Study Program. It is my intention to enroll at least half time in the upcoming Fall Semester. If at any time I determine that I will not be enrolling at least half time in the upcoming Fall Semester, it is my responsibility to notify TJSL Financial Assistance Office and my employer. I understand that I will no longer be eligible to maintain employment under FWS from that point forward. Failure to notify TJSL and my employer of any changes in my plans could be considered a violation of ethical standards and/or fraud.

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My signature below certifies that I have read, understood, and agree to the above statements.

Signature: _____ *Date:* _____

Student's Name: _____ *TJSL ID #:* _____