**WORK-STUDY AGREEMENT**

I understand that this work-study is a work program, and I am expected to perform assigned duties in a mature and responsible manner under the direction of my supervisor.

I understand that I will be terminated from my position if I do not perform my duties in a satisfactory manner and that securing another job may not be possible.

I understand that I am eligible to earn a pre-determined amount for the school year as established by the financial aid office and I am responsible for not exceeding that amount without approval from my supervisor.

I understand and agree that I will monitor the amount I have available to earn and communicate this information to my supervisor.

I understand that if I work fewer hours or accept a position that offers fewer hours, I may not earn the full amount of my work-study opportunity.

I understand that if I am not available during the evenings and weekends, I may not be able to earn the full amount of my work opportunity.

I understand that I must keep the supervisor in my primary position aware of any additional hours I have worked in a second position.

I understand that any on-campus earnings I earn during the academic term may be counted toward my total work-study earnings.

I understand that I am only able to earn work-study during the academic term and absences, even if approved, may result in a reduction in the total amount I can earn in a given semester.

I understand that work-study is awarded per semester and that if I fail to earn the full amount of my work-study award in the fall, I will not be able to earn the difference in the spring.

I understand that I must complete employment paperwork prior to working and that I must meet all deadlines requirements or I forfeit my work-study opportunity.

I understand that I am to regularly check my Drury email as important information about work-study and student employment is communicated exclusively via email.

I understand that if I don’t file a FASFA prior to April 1st each spring, I may not be considered for work-study the following year.

I have read and understand this Work-study Agreement.

**Student’s Signature**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ **Date**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Print Student Name**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ **ID**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

6/1/23