*4505 Maryland Pkwy, Campus Box 452016, Las Vegas NV 89154-2016*

*Fax (702) 895-1353 · Phone (702) 895-3424 ·* [*http://finaid.unlv.edu*](http://finaid.unlv.edu/) *· Twitte*[*r: @UNLV\_FinAidS*](mailto:@UNLV_FinAidSch)*ch*

OFFICE USE ONLY

**Work Study Employment: Not Enrolled Summer Semester 2014**

**With An Intent to Enroll Fall Semester 2014 Form**

Student Name: NSHE ID:

The use of work study funds while not enrolled during summer semester 2014 may only be used in limited circumstances. In addition, not all students will qualify because of extremely limited funds.

**TO BE CONSIDERED FOR SUMMER WORK STUDY:**

 Must have been enrolled at least half time during Spring semester 2014

 Must have previously been approved to receive work study funds by the Financial Aid & Scholarships

Office along with the hiring UNLV department

 Must have previously completed a valid 2013-2014 Free Application for Federal Student Aid (FAFSA)

 Must have also completed a valid 2014-2015 Free Application for Federal Student Aid (FAFSA) to continue working beyond June 30, 2014.

 Must attest his or her intention to enroll at UNLV half-time status or more for Fall semester 2014

 Preferential consideration is provided to students already working at the UNLV Library or Pre-School

Center

*Note: Students who recently graduated from UNLV during Spring Semester 2014, have no intention to re-enroll at UNLV during the Fall semester 2014, are not eligible for Summer semester 2014 work study according to federal financial aid program rules.*

**YOU ACKNOWLEDGE & UNDERSTAND:**

(INITIAL): I acknowledge I will enroll at UNLV at least half time status during Fall semester 2014.

(INITIAL): I understand Summer semester 2014 work study funds received as a non-enrolled student will be reported as a financial resource within my financial aid award package for Fall semester 2014 and Spring semester 2015. I acknowledge any financial aid received during these two semesters may be reduced because of my Summer semester 2014 work study employment.

\_(INITIAL) I understand if I decide to enroll in classes for Summer semester 2014 after I indicated I would not do so, I will immediately notify the Financial Aid & Scholarships Office of this decision. I understand I would also need to complete a 2014-2015 Free Application for Federal Student Aid (FAFSA) form if I want to work past June 30, 2014. I understand my Summer semester 2014 work study employment may be reduced

or cancelled if I enroll in classes for Summer semester 2014 and my eligibility for the program changes.

Student signature:

Date: