UNIVERSITY OF MARYLAND
SUMMER 2011/FALL 2011/SPRING 2012
FEDERAL WORK-STUDY STUDENT REQUEST
(Supervisor's On-line Orientation must completed)
http://www.umaryland.edu/fin/workstudy/index.html

Could this work-site be considered as Community Service? Yes [ ] No [✓]

UMB Department Department of Pediatrics
(Full Name of Department)

Off-Campus Agency _____
(Full Name of Agency)

Address 3 East Lee Street, Baltimore, Maryland 21202

Telephone (410) 706-5289 Fax No. 410-706-0653

Work Study Supervisor's Name Jill Kempthorne, M.D.

Work Study Supervisor's Title Assistant Professor of Pediatrics

E-mail Address jkempthorne@peds.umaryland.edu

Alternate Supervisor's Name vkeane@peds.umaryland.edu

Alternate Supervisor's Title Associate Professor of Pediatrics

E-mail Address vkeane@peds.umaryland.edu

Job Title Project Assistant - PATH Medical Home Transformation

Duties Data entry and analysis for our patient satisfaction surveys and comment cards; helping to develop and implement our pre-visit chart review process; helping with our medication reconciliation process; helping with care coordination and patient outreach; and assisting in upgrading our clinic website.

Number of students requested to perform duties described above 1
(Complete a separate request form for a job with different duties)

Completion of this request form does not guarantee the department/agency that Federal Work Study students will actually be referred. The person who signs this form must also sign the Job Certification Form and the biweekly payroll time sheets. If a student exceeds their maximum WS award, the supervisor's department is responsible for paying 100 percent of the over award.