UNIVERSITY OF MARYLAND  
SUMMER 2019/FALL 2019/SPRING 2020  
FEDERAL WORK-STUDY SUPERVISOR’S STUDENT REQUEST  
(Supervisor’s On-line Orientation must be completed) http://www.umaryland.edu/workstudy

TO PARTICIPATE IN THE FWS PROGRAM THERE MUST BE A SUPERVISOR AND AN ALTERNATE SUPERVISOR

Please attach a job description for this FWS position.

Could this work-site be considered as Community Service? Yes ___ No ___  

UMB Department _____________________________________________ 
(Full Name of Department)  

Off-Campus Agency ___________________________________________
(Full Name of Agency- For Off-Campus Positions Only)  

Address ___________________________________________________  

Telephone __________ Fax No. __________  

Work Study Supervisor’s Full Name _____________________________  

Work Study Supervisor’s Title _________________________________  

E-mail Address ______________________________________________  

Alternate Supervisor’s Full Name _______________________________  

Alternate Supervisor’s Title _________________________________  

E-mail Address ______________________________________________  

Job Title ___________________________  

Job Function: ___ Technical ___ Administrative ___ Research Lab ___ Research Clinical ___ Tutor ___ Program Admin.  

Duties: _____________________________  

Completion of this request form does not guarantee the department/agency will have a Federal Work-Study student employee. The person who signs this form must also sign the Job Certification Form and approve the biweekly payroll timesheets. If a student exceeds their maximum FWS award, the supervisor’s department is responsible for paying 100 percent of the over award.
Federal Work Study

Job Title: Library Research Assistant
Job Functions: Research Lab and Research Clinical

Duties: Prepare course materials and perform library research.