STEPHEN F. AUSTIN
STATE UNIVERSITY
NACOGDOCHES, TEXAS

Office of Financial Aid and Scholarships
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Nacogdoches, TX 75962-3052
(936) 468-2403
FAX (936) 468-1048
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Summer Federal Work Study Form

Student's Name: _____ Student ID: _____

☐ I would like to have federal work study applied to my financial aid account for the summer. I plan to continue attending SFA at least half-time in Fall 2023.

Department for which you are working: _____

Earnings must be used to cover expenses associated with your financial need for the next period of enrollment. If you drop courses for the fall term, you must notify the Office of Financial Aid and Scholarships and stop working immediately.

As certified by the signature below, all the information provided on this form is true and complete to the best of my knowledge.

I understand that the Office of Financial Aid and Scholarships may request additional documentation to verify the above information.

_____ _____

Student Signature Date

For Office Use Only:

FAFSA Completion Date _____

Need Amount (EFC) _____

Last Updated December 6, 2022.