This checklist is to help insure accuracy and timelines in the processing of your work-study agreement.

Below is an itemized list of documents that must be returned

Please complete and return the following documentation:

- Application for Assistance
- Detailed Job Description(s) for each student position
- IRS/State Franchise Board Letter(s) of Exemption or Articles of Incorporation (referred to in question # 4 of the Application for Student Assistance)
- Agreements - (Two copies) Signatory must have contractual signature authority. Return both copies.
- Signature Authorization Form - We must have a signature sample of the employer personnel who will be endorsing student time records. Only one signature is allowed per employer to prepare for timesheet processing automation.

Important Notes:

Please note that you will need to make monthly payments and each monthly payment is equal to 50% of the total earned by the student during the previous month. Each payment will be due upon receipt of an invoice from the University’s Financial Aid Office, and will be delinquent 20 days after the date of the invoice. Checks should be made payable to the Regents of the University of California and mailed to:

University of California, Santa Cruz
Cashiers Office
102 Hahn Student Services Bldg.
Santa Cruz, CA  95064-1077

Failure to submit payments within the period allowed would cause termination of both your Work-Study contract and the student's employment status.

It is the responsibility of the employer to ensure that the student does not earn wages beyond their Work-Study allocation! When the full work-study allocation has been earned by the student(s) they will no longer be paid through the University payroll system. Any earnings that exceed the student employee’s work-study allocation will be billed to the employing agency in full.

The timely processing of the above items will provide you with the best opportunity for successful participation in the UC Santa Cruz college work-study program. All documents will be reviewed for completeness and approved by the proper university authorities. Once the approval is done your job request will be posted for student review.

I have read the above and understand my responsibilities as a participating employer in the UC Santa Cruz work-study program.

_______________________________________________

Name of Employing Agency

_______________________________________________

Email Address

_______________________________________________

Employer’s Signature   Date