



UC DAVIS

SCHOOL of LAW

SUMMER 2009 LAW WORK-STUDY REQUEST FORM

Application Deadline: Friday, April 24, 2009

Date: _____

Name: _____ UC ID#: _____

Local Address: _____

City _____ State _____ Zip Code _____

Email: _____ Phone: _____

Summer Employment Period is May 18 to August 21, 2009
Maximum Summer Work-study Award is \$6,500

My expected summer income will be:

Hourly Pay Rate: _____

Employment Start Date: _____

Employment End Date: _____

Total # of hours you plan to work each week: _____

Employer must have a valid work-study contract on file before you begin employment or work-study will not be paid. Contact Work-study Coordinator Ami Tripp at 530.752.0117.

I will be employed by:

Name of Employer / Agency

Address

City _____ State _____ Zip Code _____

Supervisor/Contact Person _____ Phone Number _____

For Financial Aid Office use only:	
2008-2009 Work-study Total	\$ _____
2009-2010 Work-study Total	\$ _____
Processed by: _____	Date copy sent to SEC: _____