



## Student Accounts Office

### Work-Study Deferment Option

By signing this form, I authorize the Financial Aid office to apply the percentage of my College Work-Study earnings, with a maximum of 90%, directly to my student account. I understand that my student account will be credited the full percentage each semester as estimated earnings and if I do not fulfill the estimated credit that I have received, my student account will be charged the balance at the end of the final Semester of attendance for that academic year. If you fail to turn in two or more consecutive time sheets to the financial aid office your work-study deferment will be canceled by the Student Accounts Office and the unearned portion of the work-study deferment will be charged back to your student account. I understand that I may rescind this authorization at any time and should this authorization be rescinded, my student account will be charged with the unearned portion of the estimated credit and will no longer be eligible for work-study deferment on my student account.

Summer_____	Work-Study Award _____
Percentage of work-study award to be applied to my account _____ % (maximum 90%, Minimum 10%)	
Fall_____	Work-Study Award _____
Percentage of work-study award to be applied to my account _____ % (maximum 90%, Minimum 10%)	
Spring_____	Work-Study Award _____
Percentage of work-study award to be applied to my account _____ % (maximum 90%, Minimum 10%)	

Student Signature \_\_\_\_\_  
Please Print Name \_\_\_\_\_

Date \_\_\_\_\_  
ID # \_\_\_\_\_