



Work Study Deferment Option

By signing this form, I authorize the Office of Records and Financial Services to apply the percentage of my Federal 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 in the Fall as estimated earnings. The Spring may be less depending on my work study account balance at the end of Fall. 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 semester. Prior to registration, all accounts will be analyzed on an individual basis to make sure students will be able to fulfill their deferments. Some adjustments may be necessary at that time. If I fail to turn in two or more consecutive time sheets, the Office of Records and Financial Services reserves the right to cancel my work study deferment and charge back the unearned portion of the work study deferment to my tuition account. I understand that I may rescind this authorization at any time with written consent. Should this authorization be rescinded, my student account will be charged for the unearned portion of the estimated credit, and I will no longer be eligible for work study deferment on my student account. Any unearned portion of the estimated credit that is charged back to my tuition account will be due within 30 days of the chargeback. If there is a credit balance on my tuition account this may result in my work study deferment being reduced or cancelled. If my work study balance is satisfied in full the Office of Records and Financial Services may stop my payroll deductions for the remainder of the semester. I understand that I must be registered for the term in which I request deferment and have a balance due on my account for that term. The Office of Records and Financial Services reserves the right to adjust accounts on an individual basis with notification. I have the right to appeal the adjustment.

Summer 20 _____	Work Study Award \$ _____
Percentage of work study award to be applied to my account _____% (Maximum 90%, Minimum 10%)	
Fall 20 _____	Work Study Award \$ _____
Percentage of work study award to be applied to my account _____% (Maximum 90%, Minimum 10%)	
Spring 20 _____	Work Study Award \$ _____
Percentage of work study award to be applied to my account _____% (Maximum 90%, Minimum 10%)	

Please Print Name _____

ID # _____

Student Signature _____

Date _____