

Office of Student Financial Aid & Scholarships

2024-25 STUDENT WORK-STUDY APPLICATION

ATTENTION !!! Information on this application will be used to evaluate employment opportunities. This application is only valid for Fall 2024, Spring 2025, and Summer 2025 semesters. Completing this application does not guarantee a position. Applications that are not complete or legible will be returned to the applicant. NOTE: Student must have valid 2024-25 FAFSA or TASFA on file and all FA checklists completed.

DEMOGRAPHIC INFORMATION (Please Print Clearly)	DOB:// UTPB ID:	
Applicant's Name:		
Last	First	M.I.
Local Mailing Address: Street, Apt. #, P.O. Box	City State	Zip
	,	,
Permanent Mailing Address:Street, Apt. #, P.O. Box	City State Zip	
Phone #:/	/ E-mail:	
U.S. Citizen? Yes No Have you applied for Financial Aid		
WORK RELATED INFORMATION		
Classification: ☐ Freshman ☐ Sophomore ☐ Junior ☐ Seni	or \square Certification \square Graduate Major?	
Have you ever been employed by UTPB? Yes No If yes,	-	
Please indicate the time of day you are available to work: Monda	y Tuesday	
	 Friday	
Are you interested in being considered for off-campus positions?	Yes □ No □ Maybe □	
Work Experience	Longth of Franciscope	Duties
Employer City Type of work	Length of Employment	Duties
Skills/Training and Computer Knowledge	References (Name, Affiliation, Phone N	lumber)
Certification and Authorization: I certify that all the information on this form is true and correct to the be	est of my knowledge. I understand that if all	of the information
requested on this form is not submitted, no action will be taken on this		
verify any or all of the information submitted with this request.		
	For Financial Aid Use Only	
Student's Signature Date	Work Study Eligible? Date Received:	
Return Application to:	Date Posted:	
Return Application to: The University of Texas of the Permian Basin	Amount: Date Posted: Initials:	
The University of Texas of the Permian Basin Office of Student Financial Aid & Scholarships	Amount: Date Posted: Fall: Date Imaged:	
The University of Texas of the Permian Basin	Amount: Date Posted: Initials:	

It is recommended that you make a copy of this form for your records