



# THE UNIVERSITY OF TEXAS PERMIAN BASIN

Office of Student Financial Aid & Scholarships

## 2022-23 STUDENT WORK-STUDY APPLICATION

**ATTENTION !!!** Information on this application will be used to evaluate employment opportunities. This application is only valid for Fall 2021, Spring 2022, and Summer 2022 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 2021-22 FAFSA on file.

### **DEMOGRAPHIC INFORMATION** (Please Print Clearly)

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 #: \_\_\_\_/\_\_\_\_/\_\_\_\_ Alternate Phone #: \_\_\_\_/\_\_\_\_/\_\_\_\_ E-mail: \_\_\_\_\_

U.S. Citizen? ☐ Yes ☐ No Have you applied for Financial Aid? ☐ Yes ☐ No

### **WORK RELATED INFORMATION**

Classification: ☐ Freshman ☐ Sophomore ☐ Junior ☐ Senior ☐ Certification ☐ Graduate Major? \_\_\_\_\_

Have you ever been employed by UTPB? ☐ Yes ☐ No If yes, in what department? \_\_\_\_\_

Please indicate the time of day you are available to work:

Monday	_____	Tuesday	_____
Wednesday	_____	Thursday	_____
Friday	_____	Saturday	_____
		Sunday	_____

### **Work Experience**

Employer	City	Type of work	Length of Employment	Duties
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

### **Skills/Training and Computer Knowledge**

_____	_____
_____	_____
_____	_____
_____	_____

### **References ( Name, Affiliation, Phone Number)**

_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

### **Certification and Authorization:**

I certify that all the information on this form is true and correct to the best 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 request. I authorize UTPB Office of Student Financial Aid to verify any or all of the information submitted with this request.

Student's Signature \_\_\_\_\_ Date \_\_\_\_\_

Return Application to:  
The University of Texas Permian Basin  
Office of Financial Aid & Scholarships  
4901 E. University Blvd. Odessa, TX 79762-0001  
Phone: (432) 552-2620 Fax: (432) 552-2621  
e-mail: [finaid@utpb.edu](mailto:finaid@utpb.edu) Campus Location: Mesa Building 1225

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

### **For Financial Aid Use Only**

Work Study Eligible? <input type="checkbox"/> Yes <input type="checkbox"/> No	Date Received: _____ Initials: _____
Amount: Fall: _____ Spring: _____ GPA: _____	Date Posted: _____ Initials: _____
	Date Imaged: _____ Initials: _____ Loans: _____