



LONG BEACH
CITY COLLEGE

Long Beach City College
Financial Aid Programs

Federal Work Study Assignment Notice

From: Michelle Bowen-Financial Aid Advisor
To: Departments Employing FWS Students
Date: 2025-2026 School year

Please complete the information requested and sign below indicating you would like to hire the student. The student should then deliver this form along with a completed New Hire Packet to the Financial Aid Office for processing.

Students will be permitted to work **15 hours per week** during the 2025-2026 school year **which begins August 18, 2025 and ends on June 19, 2026** (excluding the time period between 12/21/2025-01/04/2026). Students are not legally permitted to work before or after those dates. It will be your responsibility to monitor the student's hours each week and throughout the semester to ensure they are able to work until the end of the school year by limiting them to 15 hours.

NOTICE

CalWORKs students are subsidized by special funding through the California Community Colleges Chancellor's Office. As a result of this additional funding, CalWORKs students can work up to 20 hours per week.

If you select a CalWORKs student to be hired, **please send this completed form to:**

CalWORKs Career Experience Program (CEP) TTC GG-217 Mail Code: G18 or by email to calworks@lbcc.edu.

For federal auditing purposes, you are required to submit a copy of the student's and supervisor's signed timesheet monthly to the financial aid office. You are also required to retain in your office the original of the signed timesheet for 3 years from the end of the school year.

If the student you have chosen to hire is no longer eligible for FWS or for a reduced number of hours you will be notified when the student returns this form to the Financial Aid office.

Thank you for participating in the Federal Work-Study Program.

Today's Date		Start Date	
Student Name		Viking ID #	
Is your student a CalWORKs student?		<input type="checkbox"/> YES	<input type="checkbox"/> NO
Is your student a returning FWS participant?		<input type="checkbox"/> YES	<input type="checkbox"/> NO
Did you verify that your student was awarded FWS for the 2025-2026 year?		<input type="checkbox"/> YES	<input type="checkbox"/> NO
Department Name		Department Code	
Timekeeper Name		Extension	
Supervisor Name		Extension	
Supervisor Signature			

FOR FINANCIAL AID OFFICE USE ONLY

Status: <input type="checkbox"/> NEW <input type="checkbox"/> TRANSFER	Pay Grade: <input type="checkbox"/> 1 <input type="checkbox"/> 2
Received Date:	Processed Date:
Submitted Date:	FWS on Award Letter <input type="checkbox"/> YES <input type="checkbox"/> NO