TEXAS ON-CAMPUS WORK STUDY PARTICIPATION AGREEMENT
AT THE UNIVERSITY OF NORTH TEXAS

This Participation Agreement is between the UNT Student Financial Aid & Scholarships Office, and the ________________________ department (hereafter referred to as the employing department). This agreement covers the period from September 1, 2016 to August 31, 2017, and is for the purpose of employing Work Study students by University “On-Campus” departments.

****Per UNT Policy 05.001 – CWS students are not allowed to work during a scheduled class, even if the class has been cancelled

The employing department agrees to:

1. Continue to expend from its scholarship and student employment funds and amount not less than average expenditure from the department covering the last three fiscal years immediately preceding the year covered by this participation agreement;
2. Employ eligible students through the Federal or State College Work Study Program in Part-time positions which are nonpartisan and nonsectarian;
3. Provide employment opportunities and jobs to students, in so far as it is practical, that relate to the students’ academic major field of interest;
4. Use the college work study program positions only to supplement and not supplant positions normally filled by persons who are ineligible to participate in the work study programs;
5. Employ college work study students on a part-time basis and rate per hour will not exceed the amount approved by the University Personnel Office as the maximum pay rate for all student employees at the University;
6. Monitor the college work study student’s number of hours worked and their earnings to prevent the student from:
   a. Exceeding the authorized earnings limit (the student’s college work study award for the appropriate academic period), or
   b. Exceeding the maximum of 20 hours per week while the student is enrolled within any academic semester and 29 hours per week between Fall and Spring semesters.
7. Pay each college work study student 100% of the total funds earned by the student each month through the use of the University approved payroll procedures;
   Maintain an auditable University approved time card and time sheets with supporting documentation within the employing department. These records must indicate the actual number of hours worked by the student, the rate of pay, the total number hours paid, and the signature of both the employing department’s supervisor and the student employee. **Students are not allowed to submit hours for time worked during scheduled classes.**
8. Keep the records indicated in Item #7 for at least 5 (five) years following the end of the fiscal year in which the student is being paid;
9. Return all students payroll checks which have not been directly disbursed to the student back to the payroll office by the end of the 5th day following the University’s payroll date; and
10. Comply with the federal, state, and institutional regulations governing the college work study program.

The Student Financial Aid & Scholarships Office agrees to:

1. Approve each student for the college work study program through the applicable federal and state regulations which governs the program;
2. Keep the employing department informed of the charges and new requirements that affect the employing departments as they are distributed to the student aid office; and
3. Reimburse each department at a rate of 70%, or as dictated by the State regulations, of the total salary paid to each eligible college work study student at the end of each payroll period.

_______________________________________________________  _______________________________________________________
Dean, Chairman or Director  Signature of Student Financial Aid & Scholarships

_______________________________________________________  _______________________________________________________
Date Agreement Signed  Date Agreement Signed

_______________________________________________________  _______________________________________________________
Chart String (s) to be charged – DeptID/Fund

_______________________________________________________  _______________________________________________________
*Department Work Study Contact: Name  *Department Work Study Contact: Extension and Email Address

* Please provide a departmental contact for questions directly relating to your on-campus Work Study. This will aid us in ensuring that proper notification regarding policy changes and participation agreement renewals are received by the correct person within your department.

Updated: 07/15/16