



Office of Financial Aid

470 Western Highway, Orangeburg, NY 10962

(845) 848-7831

2021 - 2022

NEW FIELD WORK STUDY STUDENTS

APPLICATION FOR CAMPUS EMPLOYMENT

(Please Print)

STUDENT ID# _____

Name: _____
First Last

Social Security # _____-____-____

Address: _____
Number and Street
Apt # _____

Cell Phone # () _____-____
area code number

Home Phone # () _____-____
area code number

City: _____ **State:** _____ **Zip:** _____

Date of Birth: ____/____/____

YEAR IN SCHOOL: _____ **FRESHMAN** _____ **SOPHMORE** _____ **JUNIOR** _____ **SENIOR**

MAJOR: _____

Check One: _____ **Dorm** _____ **Commuter**

Complete and return the following documents to the Office of Financial Aid:

- **Application for Campus Employment**
- **W-4 Tax (employee's withholding Allowance Certificate)**
- **USCIS Form I-9 (Department of Homeland Security)**
 - **TWO IDs – Documents to Establish Identity (one must be photo ID and unexpired)**

ACCOUNTABILITY for PAYMENT

Please Note: Field/Clinical work location information (required)

Field/Clinical Location/Name: _____

Location Supervisor: _____

Location Address:
Street _____ City _____ State _____ Zip _____

Field Location Phone #: _____-____-____