

# WORK STUDY APPLICATION CHECKLIST

## TRAINING SERVICES DIVISION, OFFICE OF HUMAN RESOURCES

Please ensure that all documentation submitted is filled completely and signed by the appointing authority, employee, and supervisor as required.

### INITIAL APPLICATION PACKET

- Proof of U.S. Department of Education Accreditation (SUBMIT ONLY ONCE UNLESS SCHOOL CHANGES).
- Career Development Plan: and all required supporting documentation (SUBMIT ONLY ONCE UNLESS STUDY FOCUS CHANGES).
- Obligated Service Agreement
- Work Study Application and Schedule – (Please provide copies of the following):
  - Internet or catalog college course description (NOT YOUR STUDENT SCHEDULE) for each course listed on the application. IT MUST INCLUDE CLASS DATE(S) AND TIME(S).
  - Signed letter of participation approval by supervisor on business letterhead.
  - Signed letter of acceptance into a specified program from an educational institution or facility on business letterhead if different from the documentation provided for the Career Development Plan.
  - If participating in an internship, grant assistantship or practicum, a signed letter regarding acceptance into the program is required from the institution/facility as required.
  - Letter from facility/institution verifying internship/clinical completion.

### SUBSEQUENT APPLICATION PACKET

- All documentation listed in the INITIAL APPLICATION section is required for each subsequent application unless otherwise indicated. The packet must also include the following items:
- Academic Progress Form – (MUST BE SUBMITTED TO CONTINUE PARTICIPATION IN THE PROGRAM).
  - A copy of the official course transcript or a certificate from the educational facility listing the course(s) and grade(s) is required.
  - Copies of any remaining/approved timesheets for the work study program session (semester) completed.

### GUIDELINES

- THE EMPLOYEE AND SUPERVISOR HAVE READ AND UNDERSTAND THE GUIDELINES AND MY RESPONSIBILITIES
- THE APPLICATION PACKET MUST BE RECEIVED BY TSD 30 DAYS PRIOR TO THE COURSE START DATE
- Work Study Online Course Certificates for the following: Employee, Supervisor, and Appointing Authority

### TIMEKEEPING INSTRUCTOR-LED COURSE REQUIREMENT

- I AM AWARE THAT I WILL HAVE TO COMPLETE AN INSTRUCTOR-LED TIMEKEEPING COURSE UPON NOTICE

EMPLOYEE OFFICE APPROVALS (Please sign in blue ink)		
PRINT APPOINTING AUTHORITY NAME & TITLE	Appointing Authority Signature	Date
PRINT SUPERVISOR NAME & TITLE	Supervisor Signature	Date
PRINT EMPLOYEE NAME & TITLE	Employee Signature	Date
+++++ MDH USE ONLY +++++		
REVIEWER/TRAINING SERVICES DIVISION:	DATE:	
SIGNATURE:	201 W. Preston Street, Room 106, Baltimore, Maryland 21201	Phone Number 410-767-1605