Senior Work Study Program Employment Verification

This form must be completed by the student, employer/supervisor, and parent of the senior who intends on applying for the Senior Work Study Program with Solanco HS. The form must be uploaded (scanned or picture) to the Application.

Employer Information:

Place of Employment:	
Location/Address:	
Supervisor/Contact Person:	
Phone Number:	
Email:	
Average # of Hours Per Week:	
Supervisor Signature:	_ Date:

Parent Permission:

I give permission for my child,	, to
participate in the Work Study program. I understand that:	

- No credit is awarded for Work Study
- Students must continue to earn credits they need for graduation
- No transportation is provided
- Students may not miss courses in the building for additional work hours
- Work Study must be approved by the school
- Students should notify the school of change of employment

Name:

Signature: _____ [

Date:	
Jan.	