The City University of New York
FEDERAL WORK STUDY JOB DESCRIPTION FORM

AMERICA READS/AMERICA COUNTS

(CHECK ONLY ONE)
- Summer 2019 Only Academic
- Year 2019/2020 Only
- Summer 2019 & Academic Year 2019-2020

Agency Name ________________________________
Agency Address ________________________________
Borough & Zip Code ________________________________
Date Submitted ________________________________
Other person(s) (at your agency) who will be familiar with the FWS Program ________________________________

E-Mail ________________________________

FOR CENTRAL OFFICE USE ONLY
CUNYFirst Job Codes: 999_______
CUNYFirst Agency/Vendor Codes 0000000

Central Office Use Only Pay Rate: $15.00

Each job description is designed to provide specific information on one type or category of position available for FWS student referrals. An employer having more than one type of position available is requested to submit individual forms for each job category.

Title (or category) of Position: ________________________________
Date position begins ________________________________
Date position terminates: ________________________________
Number of such jobs available: ________________________________
Hours of work available per week: ________________________________
Minimum ________  Maximum ________

Children Ages for Literacy Tutoring: ____________________ Children Ages for Math Tutoring: ____________________

Job Description: ________________________________

Work is available during the following hours:
(Between 9:00-5:00) ________________________________

Is work available on weekends: Yes____ No____
Is work available on evenings: Yes____ No____
If yes, please specify: ________________________________
Indicate public transportation to company: ________________________________

Are special skills necessary? Yes_____ No____
If yes, please indicate: ________________________________

Print name ________________________________
Supervisor's signature ________________________________

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