

# California State University, Long Beach

## Federal Work-Study Program

### POSITION ANNOUNCEMENT

Job Number

Department or Organization Name

FWS Position Title

Address

Classification Level

(Refer to Work Study Salary Schedule)

Immediate Supervisor

(Area Code)

Phone Number

Department Payroll Monitoring Representative

**JOB DESCRIPTION:** List daily, periodic, and non-routine duties. Include driving if required.  
(Refer to Student Assistant/Work-Study Schedule)

**DAYS/HOURS:**

**QUALIFICATIONS:** List skills, training, or experience required or preferred

**TRAINING/SKILL DEVELOPMENT OFFERED:**

**RATE OF PAY**

**AVERAGE HOURS  
PER WEEK**

**NUMBER OF  
POSITIONS**

**PERIOD:**

SUMMER (July 1 – August 23)

ACADEMIC YEAR (August 24 - May 23)

**SIGNATURE OF FISCAL OFFICER OR PAYROLL REPRESENTATIVE**

**Date**

Return all copies to Brotman Hall 123. Your copy will be mailed to you after a job number is assigned.

For program information call: (562) 985-5852

OFFICE OF FINANCIAL AID USE ONLY:

Referrals      Placements

Summer

Academic Year