

Riverside City College Work Study New Site Application

Agency Information

Academic Year **2026/2027**

Agency Name _____

Date _____

Street Address _____

City _____

State _____

Zip Code _____

Contact Name _____

Phone _____

E-mail Address: _____

Fax _____

1. _____ Non-Profit _____ For Profit

2. Agency Mission Statement, Nature of Business, and Description of Clients Served:

3. Agency Funding Sources (check all that apply)

_____ Federal _____ State _____ County/City _____ United Way

_____ Other (explain) _____

4. Agency Fiscal Year: _____ to _____

5. How many student jobs may be available at your agency during:

_____ Summer 2025 _____ 2025-2026 Academic Year _____ Summer 2026

6. Has your agency hired students through the Federal Work Study Program in the past? _____ Yes _____ No

If yes: _____ Number of students _____ Dates employed _____ Average length employed

Which institution was used to obtain student workers? _____

7. Additional Comments: _____

(OFFICE USE ONLY)

Site Visit Date _____

Date Received

Comments: _____

Denied

Approved

Signature: _____

Department Dean

Date: _____