

Federal Work Study (FWS) Student Information

2024-2025

STUDENT INFORMATION:

Name: _____

Student ID: _____

Phone Number: _____

Email (UMSL): _____

SUPERVISOR INFORMATION

Name: _____

Title: _____

Department: _____

Email: _____

Phone Number: _____

Email to: **Sherlie Wilson**

Email address: **swilson@umsl.edu**