## 2025-2026



## **Work-Study Intent to Enroll Form**

Student's Name (PRINT):	Phone: ()
HCC ID: Date of Birth://  (9-digit number required)	Home Campus:(Primary location of attendance)
HCC is able to provide federal Work-Study opportunities to Students qualify for summer Work-Study if they meet the sum	
Summer Work-Study Conditions	
To be considered for summer Work-Study, students must mee	et ALL of the following conditions.
<ul> <li>completed the HCCS hiring process</li> <li>Completed a valid 2025-2026 Free Application for</li> <li>Completed a valid 2025-2026 Free Application for paperwork, and qualify for Work-Study</li> </ul>	25-2026 aid year by the Financial Aid Office and have
IMPORTANT: Students who are graduating or have graduated summer Work-Study. If a student is graduating from a certification be eligible for summer Work-Study.	
Intent to Enroll and State	ment of Understanding
Provide initials for each of the following statements:	
(INITIAL): I acknowledge I will enroll and attend	HCC at least half-time for fall 2025.
(INITIAL): I understand summer Work-Study fun financial resource within my financial aid award package for fareceived during these two semesters may be reduced because	
Certific	ation
By signing below, I acknowledge and confirm that the above or misleading information may result in federal fines, jail sent	
Student Signature:	Date:

HCC is committed to a workplace and educational environment free of discrimination and harassment based upon race, color, religion, age, sex, gender, national origin, disability, status as a veteran, or sexual orientation. Phone: 713-718-8490

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