



**LOUISIANA TECH UNIVERSITY**  
**Office of Financial Aid**

**Student Employment Drop Form**

**Please return this completed form to:**

Louisiana Tech University

Office of Financial Aid

PO Box 7925 Ruston, LA 71272

**This form is to be completed by the Supervisor and returned to the Office of Financial Aid when the employment of a student worker is discontinued for any reason.**

STUDENT'S Last Name

First Name

MI

STUDENT'S CWID

Reason for Discontinuing of Employment:

Student Enrollment dropped below 1/2 time; 4 hrs (undergrad), 3 hrs (grad)

Student cumulative GPA dropped below 2.0 (undergrad), 3.0 (grad)

Student has earned his/her full Work Study Eligibility

Student graduated

Student withdrew from school

Employment terminated but still in school

Transferring student to another department

Student not enrolled in Summer quarter, returning in the Fall

Other (please provide a full description in the Comments Section below)

Comments:

Department Name:

Department Code:

Federal Work Study Program

Regular Funds

Date Employment was discontinued:

Printed Name of Supervisor:

Signature of Supervisor:

Date: