

UC Santa Barbara
Policies
Issuing Unit: Student Affairs

Attachment 4465 B
Date: February 1, 1985

UNIVERSITY OF CALIFORNIA, SANTA BARBARA
STUDENT FINANCIAL SERVICES
WORK-STUDY PROGRAM

DEPOSIT FORM FOR AGENCY MATCHING SHARE OF WORK-STUDY SALARIES

Instructions: Please submit a completed Deposit Form with each check
your agency sends.

Make check payable to:

THE REGENTS OF THE UNIVERSITY OF CALIFORNIA

Please return this form WITH your check to:

Student Financial Services
Work-Study Program
University of California, Santa Barbara
Santa Barbara, California 93106

AGENCY_____ DATE_____

ADDRESS_____

PERIOD OF DEPOSIT: FALL_____ WINTER_____ SPRING_____ SUMMER_____, 19____

We presently have or expect to have students working for our agency under
the Work-Study Program for whom we are herein submitting funds to cover the
matching portion of their earnings.

Please find a check enclosed in the amount of \$_____

Signed_____

Title_____

Date check received and posted in Work-Study Office

Please direct questions about these policies to Meta.Clow@vcadmin.ucsb.edu. For questions or
comments regarding the format of the above information, please contact
webcontact@ucsbuxa.ucsb.edu.

Return to the [UCSB home page](#).

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