

**2012 SUMMER EARNINGS PETITION FORM**  
**SUBMIT TO THE OFFICE OF FINANCIAL AID BY MAY 11, 2012**

Student Name: \_\_\_\_\_ Williams ID: \_\_\_\_\_ Class: \_\_\_\_\_ Major: \_\_\_\_\_

I am applying for a reduction in my summer earnings for the following reason:

- I will participate in an internship/fellowship that will last a minimum of eight weeks. [*Complete section A*]
- I will participate in on-campus research that will last a minimum of eight weeks. [*Complete section B*]
- I will volunteer for a public non-profit service organization that will last a minimum of eight weeks. [*Complete section A*]
- I will attend summer school to make up a Williams course deficiency. [*Complete section C*]
- I will attend summer school because I have changed my major/career plans. [*Complete section C*]
- I have a medical condition/situation restricting me from working during the 2012 summer. [*Complete section D*]

**SECTION A**

I have: \_\_\_\_\_ a Williams College sponsored internship/fellowship                      I will live: \_\_\_\_\_ at home  
          \_\_\_\_\_ an internship that I acquired on my own [*See note below*]                      \_\_\_\_\_ in Williams housing  
          \_\_\_\_\_ a volunteer position at a public non-profit organization                      \_\_\_\_\_ in an apartment off-campus

My housing costs are included as part of my internship:        \_\_\_\_\_ Yes        \_\_\_\_\_ No

Housing costs, if not included as part of internship agreement:                      \$ \_\_\_\_\_

Food costs, if not included as part of internship agreement:    \$ \_\_\_\_\_

Date your internship begins: \_\_\_\_\_

Date your internship ends: \_\_\_\_\_

Gross stipend/salary/wages expected from internship/fellowship:    \$ \_\_\_\_\_

Additional summer employment plans (if any): \_\_\_\_\_

Gross income expected from additional summer employment (if any):    \$ \_\_\_\_\_

Transportation costs anticipated (if any):    \$ \_\_\_\_\_

*Specify:*

Provide a brief description of your duties. Include your position title, employer/department/supervisor, and location:



*If you are not doing a Williams College sponsored internship obtained through the Office of Career Counseling, then you must attach a copy of your acceptance/appointment letter from your summer employer. This letter must indicate the total amount of stipend/pay that you will receive and your period of interning.*

Student Signature: \_\_\_\_\_ Date: \_\_\_\_\_

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**SECTION B**

I will live: \_\_\_\_\_ at home \_\_\_\_\_ in Williams housing \_\_\_\_\_ in off-campus apartment

My housing costs are included as part of my internship: \_\_\_\_\_ Yes \_\_\_\_\_ No

Housing costs, if not included as part of internship agreement: \$ \_\_\_\_\_

Food costs, if not included as part of internship agreement: \$ \_\_\_\_\_

Start date of your internship: \_\_\_\_\_ End date of your internship: \_\_\_\_\_

Gross stipend/salary/wages expected from internship: \$ \_\_\_\_\_

Additional summer employment plans (if any): \_\_\_\_\_

Gross income expected from additional summer employment (if any): \$ \_\_\_\_\_

Transportation costs anticipated (if any): \$ \_\_\_\_\_  
*Specify:*

Student Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**SECTION C**

***You must provide documentation of the costs you state below.***

Course name(s) and ID(s): \_\_\_\_\_

College/university name: \_\_\_\_\_

I will live: \_\_\_\_\_ at home \_\_\_\_\_ in Williams housing \_\_\_\_\_ in off-campus apartment

Cost of tuition and fees: \$ \_\_\_\_\_ Cost of books and supplies: \$ \_\_\_\_\_


Housing costs (if any): \$ \_\_\_\_\_ Food costs (lunches, etc.): \$ \_\_\_\_\_

Start date of your course(s): \_\_\_\_\_ End date of your course(s): \_\_\_\_\_

Summer employment plans: \_\_\_\_\_

Gross income expected from summer employment: \$ \_\_\_\_\_

Transportation costs anticipated (if any): \$ \_\_\_\_\_  
*Specify:*

 *You must attach a copy of the confirmation letter or email you received from the Registrar indicating that your course(s) has been approved for credit.*

Student Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**SECTION D**

I will live: \_\_\_\_\_ at home \_\_\_\_\_ in Williams housing \_\_\_\_\_ in off-campus apartment

Summer employment plans: \_\_\_\_\_

Gross income expected from summer employment: \$ \_\_\_\_\_

Housing costs (if any): \$ \_\_\_\_\_ Food costs (lunches, etc.): \$ \_\_\_\_\_

Transportation costs anticipated (if any) - *Specify:* \$ \_\_\_\_\_

Student comments:

 *You must attach a letter from your physician that explains your condition/situation and why you are not able to work.*

Student Signature: \_\_\_\_\_ Date: \_\_\_\_\_