

## UNIVERSITY OF MARYLAND SUMMER 2024/FALL 2024/SPRING 2025

## FEDERAL WORK-STUDY SUPERVISOR'S STUDENT REQUEST

(Supervisor's On-line Orientation and Supervisor Acknowledgement Checklist must also be completed) http://www.umaryland.edu/workstudy

TO PARTICIPATE IN THE FWS PROGRAM THERE MUST BE A SUPERVISOR AND AN ALTERNATE SUPERVISOR

Please attach a job description for this FWS position.

Could this work-site be considered as Community Service? YesX_No				
UMB Department_ University of Maryland School of Dentistry, Pediatric Dentistry Program  (Full Name of Department)				
(Full Name of Department)				
Off-Campus Agency(Full Name of Agency- For Off-Campus Positions Only)				
(Full Name of Agency- For Off-Campus Positions Only)				
Address 650 W Baltimore St, Baltimore, MD 21201				
Telephone_410-706-7970 Fax No.410-706-4031				
Work Study Supervisor's Full Name_Glenn Canares				
Work Study Supervisor's Title Program Director				
Work Study Supervisor's Title_1709ram Birotter				
E-mail Address_gcanares1@umaryland.edu				
E-mail Address_gcanares1@umaryland.edu				
Alternate Supervisor's Full Name Erica Caffrey				
Alternate Supervisor's Title Assistant Program Director				
E-mail Address_ecaffrey@umaryland.edu				
Job Title Pediatric Dental Resident Patient Care Provider				
Job Function: Technical Administrative Research Lab Research Clinical Tutor Program Admin.				
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Completion of this request form does not guarantee the department/agency will have a Federal Work-Study student employee. The person who signs this form must also sign the student's Job Certification Form and approve the biweekly payroll timesheets. If a student exceeds their maximum FWS award, the supervisor's department is responsible for paying 100 percent of the over award.

Return completed form to:

E-Mail: FWS@umaryland.edu Phone: 410-706-7347

## Pediatric Dentistry Residents- Job description

Pediatric dental residents provide preventive	e, emergency	, and comprehensive	dental care to pediatric
patients at, or below poverty level.			