

## **New or Continuing Research Assistantship Form**

Requestor (P.I./Faculty):				ID #:	
Graduate Student:					ID #:
1.	Does the student have If yes, please expl **Students are no allowed to work of	ain: ot allowed to wor			on, and students are not
2.	Hourly pay rate: Pre-Masters: \$22.10 Post-Masters: \$23.89 (Rates are equal to the department's minimum GA salary.) (a) If the hourly rate is more than listed above please indicate the amount here: \$				
3.	Contract Start Date: Contract End Date: Please start contracts on a Monday and end contracts on a Friday				
_	Student Health Insura	nce Rates (Mand	atory expens	e) 2019-2020 rate	(likely to increase): 81.79, Summer only: \$677.91
6.	Tuition Y/N?				
		ition hours: Fall: \$456.72 \$2,661.96 \$6,654.90			Summer: Dissertation hours?
7.	GPSA and IT Fee: (\$75	5.00 per term) Y/	N?		
PI/Faculty Signature				Date	
Student Signature				Date	
Fiscal Signature				 Date	