

GRADUATE ASSISTANT HIRE FORM



Name: _____
First Middle Last

Address: _____
Street City State Zip Code

Banner ID #: _____ Telephone #: _____

WCSU E-mail Address: _____ (needed for CORE-CT)

DEPARTMENT INFORMATION

Semester: ☐ Fall ☐ Spring Year: _____ Graduate Assistant: ☐ First Time ☐ Renewal

Position: _____ Department: _____

Student Admitted to Degree Program at WCSU: ☐ Yes ☐ No

Stipend Per Semester:

☐ \$4,800 max. 20hrs ☐ \$2,400 max. 15hrs ☐ \$1,800 max. 10hrs ☐ \$1,200 max. 5hrs

*Start Date: _____

End Date: _____

*** Note: Attach a job description to this form. Graduate assistants may not start working until approved by HR.**

Dept. Chair/Supervisor Approval: _____ Date: _____

SCHOOL OF GRADUATE, INTERNATIONAL, AND CAREER STUDIES VERIFICATION

Enrollment Confirmation: ☐ Full-time ☐ Part-time How many credits: _____

Reviewer Signature: _____ Date: _____

SGICS Dean Signature: _____ Date: _____

HUMAN RESOURCES

Background Check Materials Submitted: _____

Approved by Human Resources: _____ Date: _____

FINANCIAL PLANNING AND BUDGET OFFICE

Budget Name: Graduate Assistantship Program

Approved by Budget Office: _____ Date: _____