

RTF Request for GRA Appointment:

Date: _____

Faculty name: _____

Account to be charged: _____

Please fill out fully to ensure the student(s) is appointed correctly and receives the tuition help that you've approved.

Sem. OR Specific Dates of Emp. (if not a full semester)	Student Name	Job Type: Research, Film, or Admin Work	#hrs /wk	Stipend	Tuition to be paid
<i>Fall 2012</i>	<i>John Doe</i>	<i>Research</i>	<i>20</i>	<i>Hourly, monthly or semester rate</i>	<i>3784 (equiv. to 20 hr/week TA amount) or all</i>

Please give to Michelle and/or Char by the 12th class day.

If appointments are done after that day, the student may not receive the health insurance (20 hr/week), in-state tuition (20 hr/week), or the tuition payment properly.

Office Use Only: MMM _____ CB _____
