

ADDITIONAL COMPENSATION NOTIFICATION FORM

INSTRUCTIONS: Student should submit form with sections 1 and 2 completed to the administrator in their home department <u>prior</u> to work engagement and **keep a copy of completed form for their records.**

1. Completed by Student:	
Student Name:	UNI:
Department/Program:	Degree: ☐ Masters ☐ PhD/DMA ☐ BA/BS
Current student officer appointment:	2 57,755
 □ Teaching Fellow/Teaching Assistant □ Reader/Grader □ Teaching Assistant □ Graduate Research Assistant □ Departmental Research 	☐ Teaching Assistant III
Appointment Start Date: A	Appointment End Date:
Proposed Additional Work:	
Supervisor Name:	Supervisor Department
Departmental Contact:	Contact's UNI:
Additional Work Start Date:	Additional Work End Date:
Expected Hours per Week: (NOTE: Gradu	ate Research Assistants may not exceed 8 hours/week)
I understand that as a student officer, I may receive additional outside of my normal coursework and student officer recombination with my student officer position do not excellent.	sponsibilities, provided that such arrangements in
The information that I have provided above is true and a	accurate to the best of my knowledge.
Signature:	Date:
2. Completed by proposed supervisor (please keep a c	copy for your records):
Description of work to be performed:	
Payment Will Be: ☐ based on an hourly rate of \$	per hour
Funding source/chartstring for payment:	
Is this a grant?: ☐ Yes ☐ No	
If yes, SPA approval date: Provost	Office approval date:
3. Department use only:	
Date form received in department for processing:	
GSAS Office of the Dean approval date:	(GSAS-funded TA/grader work only)