

Graduate Work-Study Request Form

Applicant _____
First Middle/Maiden Last

SS# _____

Status (check one): _____ New _____ Reappointment

If reappointment, initial to verify satisfactory progress:

(Major Professor or Department Head) Academic Program _____

(Supervisor) Work-Study _____

Category (check one):

Laboratory Assistant _____ Non-Teaching _____ Research _____

Period of Appointment (check one):

Fall & Spring (\$4,480) _____ Fall only (\$2,240) _____ Spring only (\$2,240) _____

Summer I (\$800) _____ Summer II (\$800) _____

Out-of-state fee waiver requested (check one): Yes _____ No _____

Academic/Administrative Unit _____

Budget Unit Code _____

Supervisor _____

Assignment _____

Degree (check one):

Ph.D. _____ M.A. _____ M.S. _____ Ed.D. _____

M.B.A. _____ Ed.S. _____ M.Ed. _____ M.M. _____

S.S.P. _____ Certificate in Gerontology _____

Graduate Major _____

Degree Program Admission or Eligibility Status (check one):

Regular _____

Conditional _____

Undergraduate Grade-Point Average _____

Graduate Grade-Point Average (if applicable) _____

Formula Score _____

TOEFL _____ GRE/GMAT Test Scores: Verbal _____ Quantitative _____ Total _____

Review and approval of Applicant:

Date

Academic/Department Head/

Director/Other Appropriate

Administrator _____

Dean of College/Vice President

/Other Appropriate Administrator _____

Graduate School Review and Approval:

Graduate Director _____

NOTE: Course load of no less than 9 semester hours (12 semester hours in the School of Pharmacy) required for regular semester, 3 semester hours per summer term.

***** Non-degree students are not eligible for graduate work-study.

***** Provisional students are not eligible for graduate work-study.

