REQUEST FOR ADDITIONAL ON-CAMPUS EMPLOYMENT OUTSIDE OF ASSISTANTSHIP DUTIES

ALL REQUESTS RECEIVED AFTER EMPLOYMENT HAS STARTED WILL BE DENIED FOR THAT SEMESTER. OUTDATED FORMS WILL NOT BE ACCEPTED!

ATTENTION: Domestic Students can work a maximum of 25 hours per week, including Graduate Assistantship, for the entire year. International students can work a maximum of 20 hours per week during the Academic Year and 28 hours per week during Summer semester, including Graduate Assistantship.

SECTION A: (Completed by Graduate Student)

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<tr>
<th>Last Name:</th>
<th>First Name:</th>
<th>Rocket ID #:</th>
<th>E-mail Address:</th>
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Department you are currently working your assistantship in: __________________________

Is your assistantship full time or part time?

- ☐ FT (20hrs/week)
- ☐ (10hrs/week)

Department requesting additional duties: __________________________

Estimated weekly hours of additional duties: __________________________

(Refer to form instructions for maximum hours available)

Name of the staff who hired you: __________________________

Staff's e-mail address: __________________________

Requested Dates for Additional Duties:

From: ______ To: ______

Nature of Work: (Briefly describe the additional duties)

Note: Employment outside of graduate assistantship could result in enrollment in STRS/PERS and the stipend will be subject to the required percentage of withholding for these programs.

Student Signature: __________________________ Date: __________________

SECTION B: (Completed by Graduate Assistant’s Advisor)

ADVISOR CERTIFICATION: This certifies that the assignment requested will not infringe upon the student’s progress toward their degree. Please provide comments below:

Approved by Graduate Advisor: __________________________ Date: __________________

SECTION C: (Completed by Graduate School)

The student is:

- ☐ Domestic
- ☐ International

Assistantship Status:

- ☐ Full time (20hrs)
- ☐ Part time (10hrs)

GPA is:

- ☐ Eligible
- ☐ Ineligible

Graduate School Decision:

- ☐ Approved - Hours Per Week: ________
- ☐ Denied
  - GPA ineligible
  - Max hrs. allowable reached
  - Other (See comments)

Comments:

_________________________ Date: __________________

Dean, Graduate School

DISTRIBUTION: (Emails sent) ☐ Payroll ☐ Student ☐ Career Services