



Clarion University of Pennsylvania
Graduate Assistant Appointment Request Form

Academic Year 20__ - 20__

Incomplete forms will be returned to the RC and may delay processing.

Department Making Request _____ Date _____

Account No. _____ (From RC)

Student Information

Name _____ Student ID _____

Address _____ Graduate Program _____

_____ Email Address _____

Appointment Information

GA Supervisor _____ Phone Number _____

Fulltime – tuition waiver
(up to 9 credits per term & 18.75 hrs per week)

Half time – tuition waiver
(half tuition up to 9 credits & 10 hrs per week)

No waiver/stipend only (for 18.75 hrs per week)

No waiver/stipend only (for 10 hrs per week)

Term of Appointment:

Fall 20__ Spring 20__ Both 20__ - ____

Note: All GA appointments are offered on either a one semester or one academic year basis & does not include breaks or summer.

Has this individual held a GA or work study position before? Yes No

If yes, please indicate where and when _____

RC/Designee Signature _____ Date _____

Attach copy of approved job description if new position.

All GAs must be enrolled for at least 6 graduate credits. No appointment will be approved until the student has received a regular admittance and enrolled in classes.