Graduate College 2016-17 academic Year
Request for Exception to Allow Additional Work for Graduate Assistants

If approved, don't forget to fill out the appropriate payroll form and attach to epar.

Name of Graduate Assistant: ___________________________ ID

Name of Requester (please print): ______________________ Phone
(if different than graduate assistant)

Is additional work for the same department as current assistantship? Yes ________ No _________

Length of time: fall 2016 ______ spring 2017 ________ academic year ______
(check one)

Number of hours per week: ________ or One Time Pay ________

Reason for Request: (include description of current position and nature of additional work)

____________________________________________________________________
____________________________________________________________________
____________________________________________________________________

Is the Graduate Assistant an International Student

Approval of current assistant supervisor:

Approval of academic advisor:

Graduate College Use Only

Graduate College Approval ___________________________ Date ________________

Date Department notified: Entered