## GRADUATE ASSISTANT APPOINTMENT/REAPPOINTMENT FORM

### Appointment Deadlines
- **Fall:** July 1
- **Spring:** November 15
- **Summer:** April 1

### Deadline to receive tuition waivers
- **Fall:** August 7th
- **Spring:** January 5th
- **Summer:** June 2nd

Tuition waivers will not be applied after these dates.

*Forms will be processed within 3-5 business days after receipt.*

<table>
<thead>
<tr>
<th>Position Number</th>
<th>Name:</th>
<th>Appointment Type:</th>
<th>Panther Number (#):</th>
<th>GSU E-Mail:</th>
<th>Supervisor:</th>
<th>Term:</th>
<th>Enrollment Status:</th>
<th>Department:</th>
<th>Waiver:</th>
</tr>
</thead>
<tbody>
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</tbody>
</table>

**Residency:**
- [ ] Resident
- [ ] Non-Resident

**FTE:**

**Does student have an additional Appointment?**
- [ ] Yes
- [ ] No

**Does student have an additional Appointment?**
- [ ] If so, where?

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* I have read and understand the requirements and policies for Graduate Research Assistantship in the College of Law. I understand that I may not serve in any other employment category in another department or college except as a GRA. I understand that withholding of taxes from my salary will vary depending on my tax filing status and that a tuition waiver will not be applied to my account after the semester deadline date.

**Student Signature:** ____________________________  **Date:** __________________

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**TO BE COMPLETED BY HIRING OFFICIAL**

I certify that I am employing the above student as a graduate research assistant for the semester(s) indicated. The student has met eligibility requirements to be employed by the term(s) indicated. I further certify that the student will be managed in accordance with guidelines as outlined in the University’s graduate assistant policy and the College’s graduate assistant employment manual.

**Requestor Signature:** ____________________________  **Date:** __________________

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**FOR OFFICE USE ONLY**

<table>
<thead>
<tr>
<th>Waiver Entry:</th>
<th>PPGRA Entry:</th>
</tr>
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<tbody>
<tr>
<td><strong>Fall - Date:</strong></td>
<td><strong>Date</strong></td>
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<tr>
<td><strong>Code:</strong></td>
<td><strong>Code:</strong></td>
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<tr>
<td><strong>Spring - Date:</strong></td>
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<td><strong>Code:</strong></td>
<td><strong>Code:</strong></td>
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<tr>
<td><strong>Summer - Date:</strong></td>
<td><strong>Code:</strong></td>
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Commented [DCB1]: Please refer to the Graduate Assistant Appointment Type Description document.

Commented [DCB2]: A reappointed or rehired GA must provide their 7 digit USG employee ID.

Commented [DCB3]: The supervisor of record will be responsible for approving time in ADP and answering any HR related questions in regard to the appointment.

Commented [DCB4]: Supervisor must indicate the best fit department. If an additional department is needed, please inform Dana Brown directly.

Commented [DCB5]: Please forward any special approvals from the dean and associate dean of administration and finance.

Commented [DCB6]: Student must indicate residency status.

Commented [DCB7]: Supervisor must indicate the average minimum hours expected to work during their appointment.

Commented [DCB8]: Please indicate the department or area the additional appointment is to take place.
FOR STUDENT BEING HIRED BY STUDENT'S OWN PROGRAM
GRADUATE ASSISTANT PERSONNEL ACTION FORM

[Complete Shaded Areas]

SECTION A:
Hiring Department: College of Law
Budget Number (9 Digits): 181000000

Appointment term: 

Supervisor/Initiator's Name: 

SECTION B:
Please provide information about all assistantships (and funding sources) being offered to a single student.

<table>
<thead>
<tr>
<th>Name (Last, First, M.I.)</th>
<th>Panther #</th>
<th>Employee ID#</th>
<th>Title/Level</th>
<th>FTE</th>
<th>Speedtype</th>
<th>Total Compensation</th>
<th>Per month compensation</th>
<th>Start Date</th>
<th>End Date</th>
</tr>
</thead>
</table>

Does student have another graduate assistantship? 

Is this an □ internal or □ external position?

For external, for which department: 

How many hours will you work per week for additional position(s)?

I have received a copy of the university’s Graduate Assistant Policy and I am aware of the mandatory HR orientation course/session/class.

SECTION C:

Supervisor/Initiator’s signature: 

Student’s signature: 

SECTION D:
Please provide any pertinent comments for processing:

SECTION E:

HR Coordinator Date

Authorized Name and signature for Budget Unit Date

Dean, VP, Provost, or President (or authorized designee, as required) Date

If student has not worked at Ga. State University in the last 6 months, please provide student with a copy of this form to take to HR for hire packet purposes.

FORM PF2A-1 (OWN PROGRAM) - Revised 2/10/17