



EAST STROUDSBURG UNIVERSITY
of Pennsylvania
Graduate and Extended Studies
Zimbar-Liljenstein, Rm 155
East Stroudsburg, PA 18301-2999
(570) 422-3536
Email: grads@po-box.esu.edu

FALL/SPRING

Request for Graduate Assistant Position

Completed request implies agreement with policies regulating the Graduate Assistantship (GA) Program. A position description form must accompany this request unless a previously approved description is on file at the office of Graduate and Extended Studies.

Department where student(s) will be working:	_____	Request Date	_____
	Dept./Area/Program Name		
Responsible Coordinator/Manager:	_____		
Email:	_____	Phone:	_____
Student Worker(s) will be supervised by (IF DIFFERENT FROM ABOVE)	_____		
Email:	_____	Phone:	_____

Work Commitment: ☐ Full-time (300 hrs./semester) ☐ Part-time (150 hrs./semester)

of Students Requested: _____

Requested Term(s): ☐ Fall ☐ Spring

Wage will be paid by: ☐ GA Budget ☐ Requesting Dept./Unit/Program**

**** If wage is paid by requesting Dept./Unit, Cost Code Center # must be provided:**

Hourly wage: \$8.34/Hr. _____

Tuition will be paid by: ☐ GA Budget ☐ Requesting Dept./Unit/Program**

**** If wage is paid by requesting Dept./Unit, Cost Code Center # must be provided:**

Signature: _____
Signature of Requestor Date

Signature: _____
Signature of Authorized Administrator** Date

****If Requesting Dept./Unit/Program is checked, Signature of Authorized Administrator for Cost Code Center # is required.**

Student Assigned: _____ Student ID #: _____

Student Program: _____ Residency: _____

**TO BE COMPLETED BY THE OFFICE OF GRADUATE and EXTENDED STUDIES
Graduate Assistantship Program Approval**

Graduate and Extended Studies
Approval:

☐ Yes ☐ No _____
Dean/Director Date:

GA Assignment: ☐ 1 ☐ 2 ☐ 3 ☐ 4