

Graduate TA/RA Contract Termination Form

Please Complete this form and email it to grad.school@umontana.edu. The Graduate School will forward it along to Financial Aid and Human Resources.

Student Name:

Student ID:

Department:

Dept Contact Phone:

Dept Contact:

Dept Contact Email:

Contract Type: Teaching

Research

Service

Fee Waiver Account:

Grant Funded: Yes No

Exemption Code:

Grant Index:

Remove Waiver: Yes No

Term: Fall

Spring

Summer

Term Year:

Date to Remove From Payroll (last day worked):

Reason for Termination:

Notes:

Employee Signature:

Department Signature:

OSP Signature (If needed):