

Graduate School Use Only:

- G.P.A.
- Residency
- Exemption Code
- TARA Fall
- TARA Spring



The University of
Montana

Graduate Assistant Contract

Student ID Number: _____ Name: _____

Last First Middle

Hire Dept: _____ Roster #: _____ Teaching Research

Tuition Support Information

Tuition Support Yes No Master's Doctoral

Exemption Code: _____

Fall Resident
 Spring Non Resident
 Summer TA-RA Residency (Must be accompanied by TA-RA eligibility form)

Tuition Support Account

Tuition Support Budgeting Authority: _____

Signature (Approved for funding source availability) Date

If tuition support is being charged back to a **grant** please complete

Grant Number: _____ Principal Investigator _____
Signature

If tuition support is being charged back to a **non-grant account** please complete (ORSP contract use only)

Account Number: _____ Department Authority: _____
Signature

Information on Wages

*** Must have signature of department authority ***

Index #	Index Code Name	FTE	Beg. Date	End Date	Wages-Line Total	Department Authority	Date
Total Wages							

ORSP: _____

Signature (Approved for funding source availability)

Special Conditions: _____

GRADUATE STUDENTS - PLEASE READ AND SIGN

For this agreement to remain in force, the graduate assistant must perform satisfactorily in the assigned duties. TAs and RAs must be enrolled for the minimum number of credits required for the respective TA and RA positions. FAILURE TO REGISTER FOR THE MINIMUM NUMBER OF CREDITS DURING THE NORMAL REGISTRATION PERIOD WILL RESULT IN THE CANCELLATION OF YOUR ASSISTANTSHIP. Also, it is mutually understood and agreed that funding for this contract is to come from the responsibility center(s) named above, and in the event said funding should become unavailable to the University, this agreement shall thereby become null and void and without further force or effect.

Student (Appointee) Date Department Contact Phone/Email