

RIT STUDENT EMPLOYMENT
Graduate Assistant Change Form

College/Department: _____ / _____

Last Name: _____ First Name: _____

University ID #: _____ Email: _____

- Payroll Change:**
- Re-classification from _____ to _____
 - Wage Change
 - Termination (**Include job end date and account number**)
 - Account Number Change
 - Extend Job End Date

Effective Date of Change (Refer to bi-weekly pay schedule): _____ / _____ / _____
Day / Mo. / Year

Job End Date (Refer to bi-weekly pay schedule for appropriate date): _____ / _____ / _____
Day / Mo. / Year

Current Hourly Wage: \$ _____
(For GA, GGA, GTechA)

New Hourly Wage: \$ _____
(For GA, GGA, GTechA)

Current Bi-Weekly Salary \$ _____
(For GTA 1, 2, & 3)

New Bi-Weekly Salary \$ _____
(For GTA 1, 2 & 3)

Current Salary Total \$ _____
(For GTA 1, 2, & 3)

New Salary Total \$ _____
(For GTA 1, 2 & 3)

Number of Work Hours/Week: _____

Account Number: _____
(Current number used)

New Account Number: _____
(Use for account number change only)

Authorized Signature: _____ **Date:** _____

Contact (Please Print): _____ **Phone #:** _____ **E-Mail** _____

FOR SEO USE ONLY

REGISTRATION STATUS: F _____ W _____ SP _____ SU _____

MAILSTOP _____ **EMPLOYEE #** _____

COMMENTS: _____