

RIT Student Employment Graduate Assistant Hire Form

ALL information on this form is REQUIRED. Please fill out COMPLETELY.

Job Classification - please check one

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|---|---|
| <input type="checkbox"/> Graduate Assistant (GA – Hourly Wage – 71130 Object Code) | <input type="checkbox"/> Graduate Teaching Assistant Masters (Bi-Weekly Exempt – 71145 Object Code) |
| <input type="checkbox"/> Graduate Grading Assistant (GGA – Hourly Wage – 71135 Object Code) | <input type="checkbox"/> Graduate Teaching Assistant Ph.D. (Bi-Weekly Exempt – 71145 Object Code) |
| <input type="checkbox"/> Graduate Technical (GTechA – Hourly Wage – 71140 Object Code) | <input type="checkbox"/> Other Graduate Assistant (Hourly Wage – 71125 Object Code) |

Please complete all information. Any missing fields may result in delay of processing.

College: _____ Last Name: _____ University ID #: _____ Date of Birth: _____ Sex: Male Female	Department: _____ Legal First Name: _____ Preferred First Name (optional): _____ Email: _____
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Address (US Citizens use permanent **HOME** address; International students use **LOCAL** address)

Street: _____
City: _____
County: _____
State / Zip: _____

Work Location: On Campus Off Campus
 If Off Campus, where? _____

Pay Period Start Date	Pay Period Start Date
____ / ____ / ____	____ / ____ / ____
Day / Mo / Year	Day / Mo / Year
REQUIRED - Refer to Kronos sign off schedule for pay period start and end dates	
All Graduate Assistants must have an end date	
Actual Employment Start Date (optional, for department use only)	

#Hours / Week: _____ **# Academic Semesters** _____

Hourly Wage (Non-GTA's): \$ _____ **Bi-weekly Amount (GTA's Only) :** _____

Total Assistantship Wages / Salary: _____ Please refer to the graduate assistant pay schedule on the SEO website for wage/salary guidance.

Account Number: _____ .00000 _____ %

Account Number: _____ .00000 _____ %

Authorized Signature : _____ **Date:** _____

Contact (Please Print): _____ **Phone:** _____ **Email:** _____

(Person SEO can contact in case there is a question regarding this form.)

***This form must be accompanied by the appropriate job description.
All forms must sent to seosubmitforms@rit.edu with the students name in the subject line.***

ISS Only: Verification of Employment Eligibility Signature of Designated School Official: _____ Signatory's Name and Title: _____ Nature of Employment: _____	Student Status (circle): F-1 J-1 Phone: 585-475-6943 EIN: 16-07431401
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