

# FACULTY REQUEST TO HIRE TEACHING ASSISTANT



**PH.D. PROGRAM**

**PSY.D. PROGRAM**

**DISTANCE LEARNING**

Once you have made your decision, please complete this box and deliver to DCT. Please also attach the job posting application form of the student you wish to hire and keep in mind that **student is not hired until all the necessary signatures are obtained and student is notified by Human Resources.** Preference given to FWS student applicants.

**PLEASE PRINT OR WRITE LEGIBLY**

**Faculty Member:** \_\_\_\_\_

**Student Name:** \_\_\_\_\_

**Faculty Name:** \_\_\_\_\_

**Indicate Quarter:** \_\_\_\_\_

**Course:** \_\_\_\_\_

**Class Size:** \_\_\_\_\_

**Course N<sup>o</sup>:** \_\_\_\_\_

**Note: Any specific instructions regarding this position:** \_\_\_\_\_

**Faculty delivers form to DCT for Signature**      **Date Received** \_\_\_\_\_

Financial Aid Office Verification: Eligible for FWS      Yes      No  
 Financial Aid Counselor. \_\_\_\_\_ Date \_\_\_\_\_

**Form delivered back to Program Office**      **Date** \_\_\_\_\_

### Program Chair Approval

**PAYMENT SCHEDULE**

**Assessment and research** classes will be paid \$1,000.00 for each quarter worked.

All other classes will be paid \$750.00 for each quarter worked.

Other \_\_\_\_\_

**Approved:**      Yes      No

**Program Chair:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Program office delivers form to OAA for Signature**      **Date** \_\_\_\_\_

### OAA Approval

**Approved:**      Yes      -      No

**VPAA:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Form delivered back to Program Office**      **Date** \_\_\_\_\_

**Program Office delivers form to Human Resources for Processing**      **Date** \_\_\_\_\_

Business Office Use:

H/R Approval: \_\_\_\_\_ Date: \_\_\_\_\_

Payroll Input Date: \_\_\_\_\_