GRADUATE ASSISTANT
WORK AUTHORIZATION FORM

Minnesota State University Mankato

☐ **New Appointment (New Hire Payroll Packet must be attached)**
(Packets are available at www.mnsu.edu/busoff/studentpayroll)

☐ **Reappointment** ☐ **Termination*** ☐ **Change***

Name _____ Tech ID # _____
Last First Middle

APPOINTMENT INFORMATION – HIRING DEPARTMENT COMPLETES (SHADED AREAS FOR BUSINESS SERVICES/GRADUATE OFFICE USE ONLY)

( ) Research Assistant (**RA**) engaged in a variety of duties, with some duties involving a research component.
Work Assignment: _____ **(10072)**

( ) Teaching Assistant (**TA**), working under supervision as an instructor, lab assistant, or coach.
Work Assignment: _____ **(10072)**

( ) Graduate Assistant (**GA**), not involved in research or direct instruction.
Work Assignment: _____ **(10189)**

Department _____ Cost Center _____ Routing ID _____

	Salary	Appointment Dates		Work Authorization #
Fall	$ _____	_____	to _____	
Spring	$ _____	_____	to _____	
Summer	$ _____	_____	to _____	

"TERMINATION" OR "CHANGE" PLEASE ENTER THE FOLLOWING:

	Change in Salary		Dates	Work Authorization #
Fall	$ _____	to _____	_____	_____
Spring	$ _____	to _____	_____	_____
Summer	$ _____	to _____	_____	_____

Change in Cost Center From: _____ to _____

1. _____ _____ _____
Student *Phone* *Date*

Minneosta Statute 179A.03 prohibits the University's graduate students from working for another state agency during the term of their graduate assistantship. I acknowledge that I will not be working at any other state agency while employed on this campus as a graduate assistant.

2. _____ _____ _____
Department Chair/Director *Phone* *Date*

3. _____ _____
International Student Office (if applicable) *Date*

4. _____ _____
College Dean or Vice President *Date*

5. _____ _____
Dean of Graduate Studies *Date*

TUITION WAIVER:

Fall _____ Credits

Spring _____ Credits

Print Form

Clear Form

SAVE A COPY FOR YOUR RECORDS

DECEMBER 2011