

University of Illinois at Chicago
Assistantship Form

The Legislative Audit. Commission recently completed an audit of all State of Illinois Universities Tuition and Fee Service Waivers. In response to that audit, all units interested in appointing a Graduate Assistant in which the assistant receives a tuition and service fee waiver is **REQUIRED** to complete the following form. This form **MUST** be maintained in the appointing unit's records for a minimum of 5 years.

Student's Name: _____

Appointing Unit: _____

Date: _____

If appointed, complete the following:

Type of appointment:

_____ Graduate Assistant

_____ Clinical Assistant

_____ Research Assistant

_____ Teaching Assistant

Position Requirements:

_____ Research skills

_____ Computer/Technical Skills

_____ Teaching Skills

_____ Other (please specify)

Appropriate Academic Background

Reason Student was selected:

_____ Strong academic preparation

_____ Admission to Program

_____ Teaching experience

_____ Other (please specify)

_____ Research experience

This form must be retained in the appointing unit's personnel records for a minimum of 5 years.