**[You may need to select ENABLE EDITING or VIEW, EDIT]**

**Template for GRA/GTA/GA Continuing Appointments**

**(To be printed by the Department on a Letterhead)**

**CLICK HERE AND PRESS SPACE TO REMOVE THIS TEXT**

A continuing appointment form should be completed anytime the type of graduate assistantship changes, changes in tasks/responsibilities, or changes in type and amount of compensation.

Date: **Enter Date**

Address: **Enter Address**

Dear Mr./Ms. **Enter Name**

It is my pleasure to inform you that **program** has decided to continue supporting your graduate work with an appointment in the department as a **enter type of assistantship(s) as graduate teaching assistant/graduate research assistant/graduate assistant**, effective **insert start date of appointment**.

1. Your continuing appointment as a (**specify GTA/GRA/GA or combination** will be for a full time equivalency (FTE) of **specify the FTE - 0.5 or below** and will begin on **specify start date** and end on **specify end date**. For this appointment, you will earn a total of $**enter amount** per year, distributed as follows.
Fall Semester Stipend Amount $ **amount** GTA **amount** GRA **amount** GA **GA** (FTE)

Spring Semester Stipend Amount $ **amount** GTA **amount** GRA **amount** GA **GA** (FTE)

Summer Semester Stipend Amount $ **amount** GTA **amount** GRA **amount** GA **GA** (FTE)

1. Any other compensation related to your appointment will include the following:
2. Any other GRA Support in the form of tuition and fees

Fall semester $ **amount** or **quantity** credit hours

Spring semester $ **amount** or **quantity** credit hours

Summer semester $ **amount** or **quantity** credit hours

 Tuition is paid directly to K-State [ ]  Yes [ ]  No

 Tuition is added to bi-weekly payroll and student is responsible for paying K-State

 [ ]  Yes [ ]  No

1. Course fees

Fall semester $ **fees**

Spring semester $ **fees**

Summer semester $ **fees**

 Course fees are paid directly to K-State [ ]  Yes [ ]  No

 Course fees are added to bi-weekly payroll and student is responsible for paying K-State

 [ ]  Yes [ ]  No

1. Equipment fees

Fall semester $ **fees**

Spring semester $ **fees**

 Summer semester $ **fees**

 Equipment fees are paid directly to K-State [ ]  Yes [ ]  No

 Equipment fees are added to bi-weekly payroll and student is responsible for paying K-State

 [ ]  Yes [ ]  No

1. Campus privilege fees

Fall semester $ **fees**

Spring semester $ **fees**

Summer semester $ **fees**

 Campus privilege fees are paid directly to K-State [ ]  Yes [ ]  No

 Campus privilege fees are added to bi-weekly payroll and student is responsible

 for paying K-State [ ]  Yes [ ]  No

1. Additional financial support provided by the academic unit or college not linked to your appointment but provided to support your academic pursuit.

Scholarship at $ **amount** provided by **specify academic unit/college**

Name of Scholarship **name of scholarship**

Award Period **dates of award period**

 Fall semester $ **amount**

 Spring semester $ **amount**

 Summer semester $ **amount**

Scholarship funds are distributed directly to your student account. Note: Any outstanding expenses, such as tuition, fees or other charges, are deducted from your account at the time the funds are awarded.

For this appointment, you are required to maintain full-time status as a graduate student (i.e. enroll in a minimum of 6 hours per semester during spring and fall semesters). Your primary responsibilities in the position will include **list of duties**. Your continued appointment will depend on your satisfactory performance of these duties, your continued status as a full-time graduate student in good academic standing (GPA of 3.0 or higher), need for the services, and availability of funds. If you have any questions on this appointment, please contact **name of contact** at email: **contact email**.

The benefits you will receive include the following:

GTAs/GRAs/GAs on 0.4 FTE appointment are assessed resident tuition.

GTAs/GRAs/GAs on 0.5 FTE are eligible to enroll in the GTA/GRA/GA health insurance.

<http://www.k-state.edu/hcs/benefits/health/gradhealth.html>

GTA on a 0.5 appointment receives tuition remission of up to 10 credit hours per fall and spring semesters and up to 6 credit hours in summer. *(NOTE: The tuition remission depends on the tenths of appointment as a GTA. For 0.5 appointments, the remission is up to 10 hours per semester in fall and spring. For 0.1 GTA appointments, the remission is up to 2 hours per semester. Any hours taken above and beyond the level of the remission will be billed to the student at in-state tuition rates.)*

GRAs who are paid tuition in lieu of salary will be subject to Federal and State taxes. The total amount of tuition will be distributed over six checks in the fall and spring semesters; four checks in the summer.

Your employment at Kansas State University is governed by policies contained in the University Handbook, Policy and Procedures Manual, and by other policies adopted by the University. Your employment is subject to these policies as they are and as they may from time to time be changed. It is your responsibility to be aware of and comply with these policies as well as others that may apply to you. You can view University policies here: <https://www.k-state.edu/policies/> .

If you have questions about this assistantship offer, you should contact (insert name of supervisor with contact information).

If you accept this assistantship offer, please sign below and return the **signed** letter to me at the address/email shown above by (insert date).

I accept this appointment \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date \_\_\_\_\_\_\_\_\_\_\_\_\_

Signature

(Signature block of the department head with contact information.)