

April 21, 2021



Office of Graduate Studies
Acceptance Form for Graduate Assistantship

I, _____, ACCEPT the graduate assistantship
Print first,middle initial, last name TU ID

offered by the _____, from _____ to _____ and
Department beginning date ending date

requiring _____ hours of work per week. I have read the Graduate Assistantship Handbook.
10 or 20

I understand that I must maintain a 3.0 GPA and meet the performance standards on the GA Position Requirements Form as discussed and reviewed with my supervisor related to this assistantship. If I fail to maintain these requirements, my graduate assistantship will be terminated. I understand that I will be liable for repayment of any graduate tuition waiver received, if I should withdraw from any classes or terminate my graduate assistantship. I have reviewed the Graduate Assistantship Handbook with my supervisor. I understand I have to complete _____ hours* to fulfill my assistantship contract. The assistantship also can be terminated due to departmental financial exigency. In this case, the stipend is discontinued as of a specified date, but the tuition waiver is continued to the end of the current academic term. See# below.

Student Signature: _____ Date: _____

I agree that above statement is true. I have read the Graduate Assistantship Handbook Supplement for Supervisors and Departments & the Graduate Assistantship Handbook and understand all university policies & procedures pertaining to graduate assistantships. I will orient my student to this position, confer with my student to develop a work schedule, & maintain a record of the hours worked and the work done each week. In addition, a record will be kept of supervisory sessions to ensure assistantship requirements are met. I will also notify the GAO if a new supervisor is assigned.

Supervisor Signature: _____ Date: _____

Statement of understanding
Of the Family Educational Rights & Privacy Act

I understand that by virtue of my employment with the Graduate School of Towson University, I may have access to records, which contain individually identifiable information, the disclosure of which is prohibited by the Family Education Rights & Privacy Act of 1974. I agree to comply with FERPA and TU policies regarding confidentiality of student records. I acknowledge that such willful or unauthorized disclosure violates the Towson University policy and could constitute just cause for disciplinary action including termination of my employment.

Student Signature: _____ Date: _____

*Note: In order to be consistent concerning hours worked for all students, each graduate assistant must meet the total hours as below before the end of the appointment. This ensures that each student is fulfilling his/her commitment. Please note: In each of the academic terms, there are more weeks than hours. See the Graduate Assistantship Handbook http://www.towson.edu/provost/provost/graduatestudies/assistantships/index.asp

TOTAL HOURS THAT MUST BE MET FOR ASSISTANTSHIP CONTRACT:

Table with 3 columns: Academic Term, 10-hour assistantship, 20-hour assistantship. Rows include Summer 05/24/21 - 8/6/21, Fall 8/23/21 - 12/22/21, Spring 1/10/22 - 5/20/22, and Fall/Spring 08/23/21 - 5/20/22.