

Western Illinois University School of Graduate Studies  
**Graduate/Research/Teaching Support  
Assistantship Contract Request**

Budget number:

Date of Request:

Name of student:

WIU ID number:

Graduate program:

Type of appointment:

Graduate Assistant                       Research Assistant  
 Teaching Support Assistant             Intern (Peace Corps)

Stipend per month:

Number of work hours per week:     20 hours (full-time)     13 hours (2/3 time)     Other: \_\_\_\_\_%

Employment period:                     Fall semester                     Spring semester                     Summer session

If a fall/spring contract request is submitted on or after the first day of the semester or is for less than 4-months, <u>a justification for the contract and request for tuition waiver</u> must be attached and are subject to approval by the Director of Graduate Studies.
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Please indicate specific begin and end dates, **if not** working from start of semester to end of semester:

From:

To:

From:

To:

List duties of position (be specific) and indicate percentage of time assigned to each duty. (Total should equal 100%):

Name of supervisor:

Name of alternate supervisor (must be different individual than above):

**Telephone directory information**

Work address (Building/Room No./Office name):

Work telephone number:

Work department budget number **if different** than budget department:

Fiscal agent (signature required): \_\_\_\_\_

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