

**Minot State University
Graduate Assistantship Position Description**

*Directions: The supervisor of the graduate assistant will complete this form and review its contents with the graduate assistant. The graduate assistant, supervisor, and program director or department chairperson will sign to indicate approval of the assistantship. Please submit this form along with the Contract Request and copy of the Graduate Assistantship Application to the Graduate School **by the end of the second week of the semester.***

Today's Date: _____

Program: _____

Semester of assistantship: _____

Graduate Assistant's Name: _____ **ID #:** _____

Mailing Address: _____

Faculty Supervisor: _____

Type of Assistantship:

- Teaching
- Research
- Service

Appointment FTE:

- Eighth time
- Quarter time
- Half time

Description of Assistantship--include specific responsibilities, tasks, and timelines where applicable. You may attach additional pages.

Approvals

I agree to perform the above listed activities in my role as a Graduate Assistant at Minot State University this semester.

Graduate Assistant's Signature

Date

I agree that the above listed activities are those for which I will supervise the above Graduate Assistant this semester.

Supervisor's Signature

Date

I approve of this Assistantship.

Program Director's or Department Chairperson's Signature

Date

International Students only

I understand that I may work no more than 20 hours each week during the time of my assistantship.

International Student's Signature

Date

Please Note: If additional duties are assigned during the semester, the supervisor and student should agree in writing to these additional duties and convey this agreement, along with the duties, in a memorandum to the Program Director and to the Dean of the Graduate School. The memorandum will be attached to this agreement as an addendum.