



Computer Science

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.