

Division of Graduate Education and Postdoctoral Affairs Employment Exception Request Form

Student Information

Student Name (Last, First):	_____	Student PID:	_____
Home Department:	_____	Student EID:	_____
Degree Aim:	_____	Citizenship:	_____
Admit Quarter:	_____	GPA:	_____
PCTL (Qtr):	_____	Adv. Date (Qtr):	_____
SUTL (Qtr):	_____	TA Quarters:	_____

Exception Request

Proposed Employment

Period of Employment			Appointment Information				
Quarter	Start Date	End Date	Hiring Department	Title Code	Percent Time	Pay Rate	Step Level

Graduate Employment Policy

The academic home department/program, hiring department(s)/program(s), and/or funding department(s)/program(s) should review the employment policy in the [Graduate Student Employment Policy & Procedures](#) for details on graduate student employment eligibility. Requests for exception are reviewed on a case-by-case basis.

Department Certifications

- Student is in good academic standing.
- The proposed request/appointment will not detract from the student making good academic progress.
- The proposed request/appointment is not taking away support from another student without full support.
- The student's funding package is in compliance with the [Graduate Funding Reform & Policy](#).
- The student's academic advisor supports the proposed request/appointment.

Division of Graduate Education and Postdoctoral Affairs Use Only

Spring Evaluation Rating: _____

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Department Justification

Please describe the department's need/justification for this request. This description should include, but is not limited to: 1) the unique circumstances of this case; and 2) the benefit this request will have on the home department and/or hiring department(s).

Student Qualifications

Please describe the student's qualifications for this request. This description should include, but is not limited to the following: 1) the student's relevant experience and skills; 2) the student's expertise in the subject matter; and 3) the impact to the population that will be receiving instruction from the student; including the perceived and actual quality of instruction the student will be able to provide (if applicable).

Department Approvals (Required*)

Funding Department	Name/Title	Signature	Date
Funding Department	Name/Title	Signature	Date
Home Department*	Name/Title (Department Chair or Program Director)	Signature	Date
<input type="checkbox"/> Approved		James Antony, Dean of the Division of Graduate Education and Postdoctoral Affairs	Date
<input type="checkbox"/> Not Approved			