

Millersville University

Graduate Assistant Allocation Request Form

Please submit one form for each Graduate Assistantship you are requesting.

Please submit requests to Lucie.Lehr@millersville.edu in the College of Graduate Studies and Adult Learning.

1. Department name
2. Supervisor name
3. Today's date
4. Current number of assistantships under your supervision
5. Total number of assistantships you are requesting

For numbers 1-8 below please provide the following information about this GA position. If none, please leave blank:

1. Is this a new request or a renewal?
2. Is this position fulltime, parttime or other?
3. What is the intended source of funding (cost center)?
4. Explain the importance of the requested assistantship to your program, project, or department.

5. What are the primary job responsibilities for this requested position?

6. What are the intended student learning outcomes for this position?

7. Indicate the general and special skills and abilities required for assistants under your supervision.

8. Your assessment of needs for coming academic year. Include reason for any increase.