Request for Student Appointments

This information must be completed on this form or sent via email.

Semester: (Plea	se mark one) Fall	Spring Summer	_		
Name of stude	nt:			_	
UTIED:	I	Position ID:			
Annual Salary	Amount:	Hourly Rate (URA's only): _		
Hours per wee	k: (please mark one) 5	5 10 20	30 40	Other	
Appointment A	Account Number: _				
Define Codes	Code 1:	Code 2:	Code 3:		
	Code 4:	Code 5:	Code 6:		
Comments					
Appointment 7	Γitle: (please mark one	e) GRA '""TA '"	""URA '""Post	doc	
They will need	I to turn in a time s	(URAs) will be paid of heet at the end of each ney is NOT encumber	h pay period bet	fore payroll can	•
Note: Tuition	document must be	processed before a str	udent can be app	pointed.	
• Studer	nt appointment info	ormation is due by 5 p	.m. on Septemb	er 15, 2011	
Authorized Fa	culty Signature				
NOTES:					
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Please send to 1458.	Barry Levitch blev	vittch@mail.utexas.ed	au or Campus M	iaii: ENS 103A	C0803 pnone: 232