

# Appointment Form

**Faculty Name:** \_\_\_\_\_ **Today's Date:** \_\_\_\_\_

**Name of Appointee:** \_\_\_\_\_

**Appointment Start Date:** \_\_\_\_\_

**Appointment End Date:** \_\_\_\_\_

**Appointed as a:** *Circle One*

|        |                     |            |
|--------|---------------------|------------|
| Hourly | Graduate Student-RA | Work Study |
|--------|---------------------|------------|

**Amount:** \_\_\_\_\_

**Grant Number(s) to be Charged:** \_\_\_\_\_

**COMMENTS:**

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

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