

Computer Science Department
***NEW Graduate Contract Request Form**

**NEW: For a student that has never had a contract with the Computer Science Department
For a student that has had a contract with the Computer Science Department, but will be working under a new job title*

DATE: _____ SUPERVISING FACULTY: _____
STUDENT NAME: _____ STUDENT'S BANNER ID: _____
POSITION: _____ INDEX: _____
TERM: _____
CONTRACT START DATE: _____ CONTRACT END DATE: _____

BASE RATE: _____ CREDIT HOURS: _____ Regular Dissertation
FTE: _____
MONTHLY RATE: _____

DETAILED JOB
DESCRIPTION:

JUSTIFICATION:
(for late submission, pay
increases, tuition increases,
appointment changes, etc.)

FACULTY SIGNATURE: _____ DATE: _____

Do not write below this line FOR ADMINISTRATIVE USE Do not write below this line

DATE RECEIVED: _____ CONTRACT NO.: _____
STIPEND TOTAL: \$ _____ ACCOUNTANT APPROVAL: _____
TUITION TOTAL: \$ _____ DATE APPROVED: _____
CONTRACT TOTAL: \$ _____ DATE SUBMITTED: _____

NOTES: _____

