

# Graduate Assistantship Form

When complete, submit to OneStop Services  
Email: [onestop@rider.edu](mailto:onestop@rider.edu) Fax: 609-219-4487

Name: \_\_\_\_\_ Bronc ID: \_\_\_\_\_

Major: \_\_\_\_\_

Term (indicate only one-use a separate form for each term):

\_\_\_\_ Summer 20\_\_\_\_      \_\_\_\_ Fall 20\_\_\_\_      \_\_\_\_ Spring 20\_\_\_\_

College of: \_\_\_\_ Business Admin. \_\_\_\_ Ed & Human Services \_\_\_\_ LAS

Courses to be enrolled:

Course Name	Credits	Tuition Rate per Credit
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

Student's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

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I certify that the above student is approved for a Graduate Assistantship to cover  
\_\_\_\_ 3 credits      \_\_\_\_ 6 credits      \_\_\_\_ 9 credits  
for the term indicated above. If the student should take less than the approved number  
of credits, the Assistantship shall be reduced to cover the actual tuition charges only.

Supervisor's Name: \_\_\_\_\_

Supervisor's Signature: \_\_\_\_\_

Department: \_\_\_\_\_

Phone Extension: \_\_\_\_\_