



# E&G Graduate Assistantship Alternate Funding Source for Stipend and/or Waiver 2024/2025

This form is used to notify the Office of Graduate Studies of an alternate funding source for the Graduate Assistantship (GA) stipend and/or waiver when the Graduate Assistantship is not funded by the GA base pool budget. It is the responsibility of the department to obtain funding. Please complete the form, obtain approval signature(s), and return to the **Office of Graduate Studies by May 3, 2024**. The Office of Graduate Studies or the Budget office will enter budget transfers. For questions on this form, contact the Office of Graduate Studies or the Budget office. **Individual departments/offices will be required to cover out of state tuition costs, if the GA waiver is not funded by the GA base pool budget. If your GA Appointment is a non-resident, you will be required to resubmit this form with the required additional funds to cover the out of state tuition difference (please see other side of this form for exact costs).**

**Possible sources of funds:**

- Use of department/office E&G and/or Academic Enhancement operating budget;
- Use of Dean/Director, Vice Provost, Vice President, or President residual carryforward reserves or reallocation of funds within the college or division;
- External funding sources
- Increase to Academic Enhancement department/office operating budgets

## Department/Office **REQUESTING** Funding for APPROVED GA

*(If you are requesting funds for multiple GAs, please complete a **SEPARATE** form for each GA request)*

Dept./Office Name: \_\_\_\_\_ Dept./Office Funds Center #: \_\_\_\_\_  
(Budget will be transferred into the salary & benefit commitment item(s) in this Funds Center  
 CI 510581 stipend CI 598581 waiver)

Stipend Amount (\$): \_\_\_\_\_ Waiver Amount (\$): \_\_\_\_\_

\_\_\_\_\_  
 (Print & Sign) Program Coordinator/Job Supervisor

\_\_\_\_\_  
 Date

## Funding Source

Funds Center #: \_\_\_\_\_  
(Budget will be transferred from this Funds Center # into the Dept./Office Funds Center # in the section above)

Commitment Item(s) # to transfer funds from: \_\_\_\_\_ Amount (\$): \_\_\_\_\_  
(Budget will be transferred from this Commitment Item(s) # into the Stipend & Waiver Commitment Item for the Dept./Office Funds Center # listed in the section above)  
(Must equal Stipend Amount & Waiver Amount above)

\_\_\_\_\_  
 (Print & Sign) Dean/Director/Asst Vice President/Vice President/President Responsible for this Funds Center

\_\_\_\_\_  
 Date

## Funding Source

(Complete only if there are multiple funding sources)

Funds Center #: \_\_\_\_\_

Commitment Item(s) # to transfer funds from: \_\_\_\_\_ Amount (\$): \_\_\_\_\_

\_\_\_\_\_  
 (Print & Sign) Dean/Director/Asst Vice President/Vice President/President Responsible for this Funds Center

\_\_\_\_\_  
 Date