

(PLEASE COPY, REVISE AND PRINT ON YOUR DEPARTMENT LETTERHEAD)

**Model Letter of Initial Offer and Notice of Appointment
Graduate Assistant – Non-Represented and Represented**

Note to Departments: This letter of offer constitutes an initial notice of appointment for a graduate teaching/research assistant. Conditions for renewal of this appointment should not be stated in this letter of offer. All paragraphs listed below are required as noted. Please ensure that you clearly articulate the salary on a monthly basis, prorated for the appropriate FTE.

If you are appointing an international student, please refer them to the office of International Student Advising and Services (ISAS). International students are limited to 20 hours per week of on-campus employment while school is in session and will need assistance from ISAS prior to applying for a social security card.

This letter must be signed by the dean, graduate program director, or department head/chair. As specified in the OSU Tuition Remission Policy, http://oregonstate.edu/dept/grad_school/faculty/remissionpolicy.html, only academic units may award tuition remissions. Administrative units may award tuition remissions indirectly by supplying associated salary dollars to an academic unit to be used to recruit an eligible graduate student.

Commit no more than one academic year appointment in this letter of offer and notice of appointment. For renewal of appointment in subsequent years or terms, complete a model notice of reappointment available at <http://hr.oregonstate.edu/>

Note: ** 9-Month Appointments: the academic year beginning and ending dates are September 16 – June 15. 9-month appointments generally start and end on an academic year basis. *If an appointment duration is shorter than the academic year, the reason must be noted on the appointment letter.* Term beginning and ending dates are as follows:

September 16 – December 15

December 16 – March 15

March 16 – June 15

June 16 – September 15*

* If you are hiring a 9-month graduate assistant for summer session, the appointment dates must be between June 16th and September 15th. Hire dates outside of this timeframe will negatively affect the health insurance options made available to the graduate assistant.

*If the appointment is for fiscal year, please use the following dates September 16th – September 15th

****All appointment letters must be provided at least 30 days before the start of the appointment.**

Do not deviate from these dates in the letter.

Should you have questions, or need an exception to this model letter, contact Employee and Labor Relations in the Office of Human Resources.

**USE THIS MODEL LETTER FOR
2019-2020 ACADEMIC YEAR INITIAL APPOINTMENTS ONLY**

[Date]

TO: [Student's Name]
[Student's ID Number]

FROM: [Dean, Director, or Department Head/Chair]

SUBJECT: Graduate Assistant Appointment and
Notice of Appointment for Academic Year 2019-2020 [or appropriate term dates** if less than
an academic year**]

Dear _____:

On behalf of the [Graduate Committee or other decision-maker] of the _____ graduate program I am pleased to offer you a [0.30-0.49 FTE] graduate assistantship beginning on **_____ and ending on **_____ with a salary of \$_____ per month. You will receive a tuition waiver(s) in each term during which your graduate assistant appointment is at 0.30 FTE or greater. This appointment is contingent upon your formal acceptance as a graduate degree-seeking student by the University's Graduate School, and your continued status as a graduate degree-seeking student at OSU.

****Indicate whether the employee is a GRA or GTA by term**

Fall Term	Sept. 16 – Dec. 15	<input type="checkbox"/> GRA	<input type="checkbox"/> GTA	<input type="checkbox"/> Unknown
Winter Term	Dec. 16 – March 15	<input type="checkbox"/> GRA	<input type="checkbox"/> GTA	<input type="checkbox"/> Unknown
Spring Term	March 16 – June 15	<input type="checkbox"/> GRA	<input type="checkbox"/> GTA	<input type="checkbox"/> Unknown
Summer Term	June 16 – Sept. 15	<input type="checkbox"/> GRA	<input type="checkbox"/> GTA	<input type="checkbox"/> Unknown

If the assistantship is less than an academic year, note the reason here: _____

Your assistantship will extend through _____ [enter fiscal year end. *Exception for international students - you may enter a date that coincides with 12 full months*]. You will receive written notification regarding renewal of your assistantship. Please be aware that acceptance of another offer of support may invalidate or reduce this offer.

This letter, when accepted below, serves as notice of appointment. This appointment is subject to all applicable OSU policies and standards and the Collective Bargaining Agreement between the Coalition of Graduate Employees and Oregon State University, which are incorporated herein by this reference.

Work Authorization Requirement – [Use in EACH letter]:

This offer is contingent on your demonstration of your authorization to work in the United States for OSU. Ongoing employment will require your continuing ability to demonstrate that you remain authorized to work in the United States for OSU.

Criminal History Check – [Use when an offer of employment is contingent upon a satisfactory criminal history check (CHC)]:

This position is designated as security-sensitive; therefore, your offer and start date are contingent on your successful completion of a criminal history check where you are determined to be position

qualified as per OSU Standard 576-055-0000 et seq. Incumbents are required to self-report relevant convictions.

Valid Driver's License/ Satisfactory Driving History – [Use when an offer of employment is contingent upon a valid driver's license/satisfactory driving history]:

This position requires driving a university vehicle or a personal vehicle on behalf of the university; therefore, your offer and start date are contingent on your successful completion of a motor vehicle history check where you are determined to be position qualified as per OSU Standard 576-056-0000 et seq. Incumbents must maintain a valid driver's license and self-report relevant convictions.

Upon arriving on campus, please report at your earliest convenience to the Human Resources unit of _____ [enter the appropriate Business Center/Unit and address] to conclude all necessary steps in the hiring process; delay in completing your hiring process may delay payment of wages to you.

Please make arrangements to meet with your supervisor on campus no later than _____ [appropriate date], so that you may begin work on _____ [appropriate date].

If this notice is understood and acceptable to you, please sign one copy of this memorandum and return it to me no later than _____ [insert appropriate department deadline]. This copy will be placed in your department file and a copy will be sent to the Business Center Human Resources Unit as an official record of your appointment. The original copy is for your own records.

Congratulations, [student's name]. We look forward to your joining our academic community and to assisting you in your pursuit of your graduate degree. You may expect to receive additional communications from us aimed at helping you in your personal as well as professional transition to graduate study and to OSU. Please do not hesitate to let us know how we can support you in your success.

Sincerely,

[Dean, Director, or Department Head/Chair]

cc: Business Center Human Resources Unit
Dean, Director, or Department Head/Chair

[Date]

[Graduate Assistant's Name]

Letter of Offer and Notice of Appointment for Academic Year 2019-2020

[or appropriate term dates** if less than an academic year]

Acceptance and Consent (Please review details about these requirements prior to signing this letter)

I accept this offer of appointment to a graduate assistant position, and I further acknowledge:

1. I must maintain a minimum of twelve (12) graduate credit hours towards my degree program throughout my appointment period during the academic year and make satisfactory progress toward an advanced degree. If I have a summer appointment, I must maintain a minimum of three (3) graduate credit hours towards my degree program during the summer term. However, if I wish to retain FICA Student Exemption I must enroll for a minimum of five (5) credit hours during summer term. I understand that audit registrations, course withdrawals, and enrollment in INTO OSU coursework may not be used to satisfy this 12-credit enrollment requirement;
2. Tuition charges associated with INTO OSU may not be paid by the graduate assistant tuition waiver;
3. E-campus courses may be used to satisfy the 12-credit enrollment requirement, and E-campus tuition is covered by the tuition remission;

4. Failure to make satisfactory progress to make advancement toward degree will result in the removal of this assistantship;
5. I may not work more than 255 working hours per terms, which is a maximum of .49 FTE, in all jobs or appointments I may have at the University;
6. The University agrees to remit associated student fees in the amount of 90% for each academic year term that I am on a graduate appointment. I can review additional information at <http://oregonstate.edu/fa/businessaffairs/student/tuition-and-fees>;
7. If this is my first term, the one-time matriculation fee will be remitted. If I am required to participate in the International Student Orientation, the fee amount will also be remitted;
8. If I paid a SEVIS and/or visa fee, I may receive reimbursement up to a maximum of \$500 (totaled over the duration of enrollment at OSU).
9. Health insurance is mandatory for graduate assistants. All graduate assistants will be enrolled in the University's health plan for "employee only" coverage. I must submit the necessary paperwork within 30 days of my appointment start date to enroll additional dependents in health coverage. I may waive University-provided health insurance only if I have group coverage that is deemed equivalent or better under the university plan (health, vision, and dental). I authorize the University to make a pre-tax deduction for the graduate assistant only premium from my monthly stipend or salary unless I have waived coverage under the University's plan. I authorize the university to make an after-tax deduction of 1/9 of the cost of summer health insurance for graduate assistant only premium for each month during the academic year that I have a graduate assistantship in order to pre-pay summer health insurance. I can review additional information at <http://studenthealth.oregonstate.edu/insurance/> or send an email to osustudent.insurance@oregonstate.edu ;
10. I understand that I will accrue and can use paid sick leave in accordance with the collective bargaining agreement, and;
11. I am in a position determined to be in the Coalition of Graduate Employees (CGE) bargaining unit, and I consent to the University releasing to the union my FTE and bargaining unit status.

Timing of your Offer Acceptance

Oregon State University is a participant in the Council of Graduate Schools (CGS) Resolution for Graduate Scholars, Fellows, Trainees and Assistants (also known as the *April 15th Resolution*), located here: http://cgsnet.org/ckfinder/userfiles/files/CGSResolution_Jan2017.pdf. We seek your assistance in complying with its terms. Please read the Resolution carefully while considering your offer of appointment. *Your acceptance of this offer is not valid or effective until April 15 of the year in which your appointment will begin.*

I accept the offer as outlined in this letter.

Graduate Assistant's Signature

Date

University ID Number

Consent to Release Salary Information

I further acknowledge that I am a member of the bargaining unit, and I have the right to elect whether or not to release my salary rate to the union. I understand that this election shall remain in effect until I revoke my consent in writing and the written revocation is delivered to Oregon State University, Office of Human Resources. I acknowledge that should I revoke my consent to release this information, such revocation shall not affect disclosures made by Oregon State University prior to the receipt of any such written revocation.

I have indicated my election below. (check one)

_____ **No, the University is not permitted to release my salary rate to the union.**

_____ **Yes, the University is permitted to release my salary rate to the union.**

Graduate Assistant's Signature

Date

University ID Number

cc: Business Center Human Resources Unit
Dean, Director, or Department Head/Chair

Model Letter