RA/TA Implementation Spreadsheet Instructions - Academic Year 17-18

Graduate Employment Policies: Institutional employment policies as relates to graduate students may be found at: http://gradschool.mines.edu/GS-Assistantship-Policies

‣ Commonly Asked Questions Include:

– Contract types and purposes?

· **Teaching Assistants**: Awarded to assist in instructional activities. It is School policy that Teaching Assistants are NOT assigned full responsibility for teaching courses.

· **Research Assistants**: Supervised by individual faculty to perform research that is directly related to a student's area of study.

– What is the maximum allowable FTE?

· Academic Year: 0.5 FTE or 20 hrs/week

· Summer: 1.0 FTE or 40 hrs/week

· 0.67 FTE commitments imply annual support at the 0.5 FTE level during the AY and at the 1.0 FTE level during the summer.
  This is awarded so that student's may count on a stable monthly stipend.

– Can tuition be waived?

· Tuition is <u>NEVER</u> waived. Students are billed tuition at the tuition paid; either by the student, the research contract, or the institution.

– Which components of a contract are required, which are optional?

· **Stipends**: Represent payment for services provided. **All RA/TA contracts must include this component.** These are taxable, and may be terminated for non-performance.

· **Tuition/Fee/Insurance payments**: These represent a gift to the student employee. Tuition and Fee payments are optional on all RA/TA contracts.
  These are not taxable, and once awarded may not be revoked for non-performance.

– What institutional financial aid is available?

· **Differential Tuition**: (Fall and Spring terms only). Awarded to full-time (0.5 FTE), non-resident students for whom the contract pays the resident portion of tuition.
  Pays difference between non-resident and resident tuition. US citizens and permanent residents eligible first year ONLY (because they should be CO residents by second year).

· **Summer Tuition Fellowship**: Summer only. Awarded to all RAs who are full-time (1.0 FTE), and whose stipends are paid by an overheaded research contract. Pays full tuition
  for the REQUIRED 3 credit hours of research registration. Any course registration is above this minimum requirement and NOT covered by the Summer Tuition Fellowship program
  (but 4 credit hours in Summer II cost the same as 3).

1

FILLING OUT THE FORM

*Note, there are several comments within the form, [↖ lease review them for additional guidance

"GENERAL INFORMATION"

SECTION 1.

1. Fill out cells C7-C13 (Name, etc.) completely (middle name is not required)

1.	First	
	Middle	
	Last	
	CWID	
	Email	
	Department	
	Contract Submission / Revision Date	

2

SECTION 2.

2. Fill out cells L7-L13 (contract type, etc.) completely by selecting

Appointment Type	Select
Part of Annual Contract	Select
Contract Term	Select
Tuition Residency Status (R/N)	Select
Eligible for Reduced Registration (Y/N)	Select
Eligible for Differential Tuition Award (Y/N)	Select
DO NOT USE	Select

these change per the "contract term"

note: comments in cells, specified by red triangles, are to assist you

3

SECTION 3.

note: you wil get errors if your inputs do not meet the institutional requirements specified in rows 17/18 (C:E)

3. Fill out cells C16-E16:

3.		Number Credit Hours Registered	FTE	Semi-Monthly Stipend
		9.0	0.5	$0.00
	Institutional Min/Max Requirements	>=	<=	>=

3a. Fill out cell C16 (credit hours student had registered for - please confirm with student)

3b. Fill out cell D16 (FTE)

3c. Fill out cell E16 (semi-monthly stipend - pay student will receive each pay period)

4

SECTION 4.

4a. Fill out cell L15

4b. If you need to change the dates in cells L16/17, delete formula and type in desired dates

Will the Semi-Monthly Stipend Amount stay the same for all pay periods in this form?	Select
Contract Start Date	
Contract End Date	
Number Pay Days	

note: these dates fill automatically based on contract term. They can be changed.

"STIPEND"
SECTION 5.
*Note, the images that follow for SECTION 5. "STIPEND" are based upon the following sample entries/selections in "General Information" section:

GENERAL INFORMATION						
1.	First	**Best**		Appointment Type	Initial Appointment	**2**
	Middle	**Student**		Part of Annual Contract	N	
	Last	**Ever**		Contract Term	Fall	
	CWID	**10101000**		Tuition Residency Status (R/N)	N	
	Email	bestever@mymail.mines.edu		Eligible for Reduced Registration (Y/N)	N	
	Department	**Applied Math and Statistics**		Eligible for Differential Tuition Award (Y/N)	Y	
	Contract Submission / Revision Date	**7/25/2017**		DO NOT USE	Select	

		Number Credit Hours Registered	FTE	Semi-Monthly Stipend	Will the Semi-Monthly Stipend Amount stay the same for all pay periods in this form?	Y	**4**
3.		9.0	0.5	$800.00	Contract Start Date	09/01/17	
		9.0	0.5	$700.00	Contract End Date	12/31/17	
	Institutional Min/Max Requirements	>=	<=	>=	Number Pay Days	8	

EXAMPLE 1: Pay does not change over pay periods (cell L15 is "Y")

STIPEND									
TOTAL STIPEND AMOUNT	**6,400.00**				FUNDING SOURCES				
		Select	Select	Select	Select	Select		Remainder To Be Allocated
PAY PERIOD	AMT / PAY PERIOD	Index 1	Index 2	Index 3	Index 4	Index 5	Total	
(SM-17) Sep 1-15	800.00	-	-	-	-	-	-	800.00
(SM-18) Sep 15-30	800.00	-	-	-	-	-	-	800.00
(SM-19) Oct 1-15	800.00	-	-	-	-	-	-	800.00
(SM-20) Oct 15-31	800.00	-	-	-	-	-	-	800.00
(SM-21) Nov 1-15	800.00	-	-	-	-	-	-	800.00
(SM-22) Nov 15-30	800.00	-	-	-	-	-	-	800.00
(SM-23) Dec 1-15	800.00	-	-	-	-	-	-	800.00
(SM-24) Dec 15-31	800.00	-	-	-	-	-	-	800.00
REMAINING STIPEND TO BE ALLOCATED	-							
TOTAL BY FUNDING SOURCE		-	-	-	-	-	-	6,400.00
PERCENT BY FUNDING SOURCE								

5a(I). The TOTAL STIPEND AMOUNT (F22) is calculated based upon the Semi-Monthly Stipend (E16) and Number Pay Days (L18).
5a(II). The REMAINING STIPEND TO BE ALLOCATED (F33) shows how much of the TOTAL STIPEND AMOUNT (F22) is left to allocate
*Note, if the stipend amount does not change per pay periods the cells (F25:F32) will fill automatically

EXAMPLE 2: Pay does change over pay periods (cell L15 is "N")
5b(I). If the pay for the student changes over the pay periods, enter each semi-monthly stipend amount, per pay period, into cells F25-F32.
    Please remember that the stipend in any pay period must meet the minimum semi-mothly stipend amount required (E17) or you will get an error.

TOTAL STIPEND AMOUNT	**6,400.00**			FUNDING SOURCES				
		Select	Select	Select	Select	Select		Remainder To Be Allocated
PAY PERIOD	AMT / PAY PERIOD	Index 1	Index 2	Index 3	Index 4	Index 5	Total	
(SM-17) Sep 1-15	1,000.00	-	-	-	-	-	-	1,000.00
(SM-18) Sep 15-30	1,000.00	-	-	-	-	-	-	1,000.00
(SM-19) Oct 1-15	700.00	-	-	-	-	-	-	700.00
(SM-20) Oct 15-31	700.00	-	-	-	-	-	-	700.00
(SM-21) Nov 1-15	700.00	-	-	-	-	-	-	700.00
(SM-22) Nov 15-30	700.00	-	-	-	-	-	-	700.00
(SM-23) Dec 1-15	800.00	-	-	-	-	-	-	800.00
(SM-24) Dec 15-31	800.00	-	-	-	-	-	-	800.00
REMAINDER TO BE ALLOCATED (PAY PERIODS)	0.00							
TOTAL BY FUNDING SOURCE		-	-	-	-	-	-	6,400.00
PERCENT BY FUNDING SOURCE								
INDEX								

*You can now follow the same steps starting at 5c. (keeping in mind that you will allocate different amounts per pay period than the following example)

5c. You now can allocate the stipend by RA/TA type and by indices

	TOTAL STIPEND AMOUNT	6,400.00	FUNDING SOURCES						
			RA	RA	TA	Select	Select	Total	Remainder To Be Allocated
	PAY PERIOD	AMT / PAY PERIOD	210211	210212	210213	Index 4	Index 5		
	(SM-17) Sep 1-15	800.00	800.00	-	-	-	-	800.00	-
	(SM-18) Sep 15-30	800.00	800.00	-	-	-	-	800.00	-
	(SM-19) Oct 1-15	800.00	800.00	-	-	-	-	800.00	-
	(SM-20) Oct 15-31	800.00	800.00	-	-	-	-	800.00	-
	(SM-21) Nov 1-15	800.00	-	800.00	-	-	-	800.00	-
	(SM-22) Nov 15-30	800.00	-	800.00	-	-	-	800.00	-
	(SM-23) Dec 1-15	800.00	-	-	800.00	-	-	800.00	-
	(SM-24) Dec 15-31	800.00	-	-	800.00	-	-	800.00	-
	REMAINING STIPEND TO BE ALLOCATED	-							
	TOTAL BY FUNDING SOURCE		3,200.00	1,600.00	1,600.00	-	-	6,400.00	-
	PERCENT BY FUNDING SOURCE		50.00%	25.00%	25.00%			100.00%	

(Row label on left: **5.**)

5d. Select RA/TA (cells G23:K23 for all funding sources you intend to use - up to 5)

5e. Enter the index numbers (cell G24:K24 for all funding sources you intend to use - up to 5)

5f. Allocate the pay for each index used

5g. The Remainder To Be Allocated column (M25:M32) is used as a guide to ensure that all of your stipend amounts have been properly allocated per index
The column will show all zeros (-) when you have fully and properly allocated your stipend amounts over the pay periods

5h. Cells G34:K34, G35:K35, G36:K36 summarize the total funding by index and the percent of funding from each index

6

"TUITION AND FEES"
SECTION 6.

Initial SECTION 6 view based upon above entries/selections:

		TUITION & FEES									
			Index	Amount							
	TUITION FELLOWSHIP (if applicable)	Differential Tuition Fellowship	240017	$ 9,525.00							
				FUNDING SOURCES							
					RA	RA	TA				
					210211	210212	210213				
				% AMOUNT	50.00%	25.00%	25.00%			Total	Remainder To Be Allocated
6.	TUITION/INSURANCE/FEES TO BE PAID BY DEPT	Pay Tuition (Y/N)	Select	-	-	-	-	-			
		Pay CSM Health Insurance (Y1/Y2/N)	Select	-	-	-	-	-		100.00%	0.00%
		Pay CSM Mandatory Fees (Y/N)	Select	-	-	-	-	-		-	-
	TOTAL TUITION, FEES, AND INSURANCE PAID BY DEPARTMENT			-	-	-	-	-	-	-	-
	PERCENT BY FUNDING SOURCE			-						0.00%	100.00%
	OPTIONAL FEES	Select		-						-	-
		Select		-						-	-
		Select		-						-	-
		User Defined (specify and input amount in next cell)		-						-	-
		User Defined (specify and input amount in next cell)		-						-	-

6a. Cells C41:F41 (TUITION FELLOWSHIP) will populate ONLY based upon previous selections and entries.

6b. Cells G45:K45, G46:K46, G47:K47 populate automatically based upon previous selections and entries

TUITION & FEES

		Index	Amount	FUNDING SOURCES					Total	Remainder To Be Allocated
TUITION FELLOWSHIP (if applicable)	Differential Tuition Fellowship	240017	$ 9,525.00							

-choose "Y1" if student enrolls in Fall semester
-choose "Y2" if student enrolls in Spring semester and did not enroll in previous Fall semester, or did not have student health insurance in the Fall semester (please confirm with student)
-choose "N" if student is waiving health insurance

Populates Automatically
(change formulas <u>only</u> if allowable, given your funding sources)

6.

		% / AMOUNT				Total	Remainder To Be Allocated
						100.00%	0.00%
TUITION/INSURANCE/FEES TO BE PAID BY DEPT	Pay Tuition (Y/N)	Select	-			-	-
	Pay CSM Health Insurance (Y1/Y2/N)	Select	-			-	-
	Pay CSM Mandatory Fees (Y/N)	Select	-			-	-
	TOTAL TUITION, FEES, AND INSURANCE PAID BY DEPARTMENT	-	-	-	-	-	-
	PERCENT BY FUNDING SOURCE					0.00%	100.00%
OPTIONAL FEES	Select	-				-	-
	Select	-				-	-
	Select	-				-	-
	User Defined (specify and input amount in next cell)	-				-	-
	User Defined (specify and input amount in next cell)	-				-	-

EXAMPLE 3: Using Federal or State Funded Research Indices - TUITION/FEES TO BE PAID BY DEPT section
6c(I). If you are choosing to pay tuition, make the selection in cell E48
6c(II). If you are choosing to pay for Health Insurance, make the selection in cell E49
6c(III). If you are choosing to pay for Mandatory Fees, make the selection in cell E50
6c(IV). The formulas will allocate the costs based upon the stipend percentages (per Federal and State requirements)

		Index	Amount							
TUITION FELLOWSHIP (if applicable)	Differential Tuition Fellowship	240017	$ 9,525.00							

6.

			FUNDING SOURCES						Total	Remainder To Be Allocated
			RA	RA	TA					
			210211	210212	210213					
		% / AMOUNT	50.00%	25.00%	25.00%				100.00%	0.00%
TUITION/INSURANCE/FEES TO BE PAID BY DEPT	Pay Tuition (Y/N)	Y / 8,085.00	4,042.50	2,021.25	2,021.25				8,085.00	-
	Pay CSM Health Insurance (Y1/Y2/N)	Y1 / 995.00	497.50	248.75	248.75				995.00	-
	Pay CSM Mandatory Fees (Y/N)	Y / 1,108.09	554.05	277.02	277.02				1,108.09	-
	TOTAL TUITION, FEES, AND INSURANCE PAID BY DEPARTMENT	5,094.05	2,547.02	2,547.02	-		-		10,188.09	-
	PERCENT BY FUNDING SOURCE	50.00%	25.00%	25.00%					100.00%	0.00%
OPTIONAL FEES	Select	-							-	-
	Select	-							-	-
	Select	-							-	-
	User Defined (specify and input amount in next cell)	-							-	-
	User Defined (specify and input amount in next cell)	-							-	-

6c(V). You do not need to calculate any values in the TUITION/FEES TO BE PAID BY DEPT section

EXAMPLE 4: Not using Federal or State funded research indices - TUITION/FEES TO BE PAID BY DEPT section

6d(I). If you are **not** using Federal or State funded research indices for Tuition/Health Insurance, and Mandatory Fees delete the RA/TA information, indices, and percentages

		Index	Amount										
TUITION FELLOWSHIP (if applicable)	Differential Tuition Fellowship	240017	$ 9,525.00										

6.

				FUNDING SOURCES							Total	Remainder To Be Allocated
				TA								
				210215								
			% AMOUNT									
TUITION/INSURANCE/FEES TO BE PAID BY DEPT	Pay Tuition (Y/N)	Y	8,085.00	8,085.00							8,085.00	-
	Pay CSM Health Insurance (Y1/Y2/N)	Y1	995.00	995.00							995.00	-
	Pay CSM Mandatory Fees (Y/N)	Y	1,108.09	1,108.09							1,108.09	-
	TOTAL TUITION, FEES, AND INSURANCE PAID BY DEPARTMENT		10,188.09		-		-		-		-	10,188.09	-
	PERCENT BY FUNDING SOURCE		100.00%								100.00%	0.00%
OPTIONAL FEES	Select		-								-	-
	Select		-								-	-
	Select		-								-	-
	User Defined (specify and input amount in next cell)		-								-	-
	User Defined (specify and input amount in next cell)		-								-	-

6d(II). Type in 'RA' or 'TA' (cells G45:K45 for all funding sources you intend to use - up to 5)

6d(III). Type in the index numbers (cell G46:K46 for all funding sources you intend to use - up to 5)

6d(IV). Allocate the expense for each index used

6d(V). The Remainder To Be Allocated column (M48:M51) is used as a guide to ensure that all of your stipend amounts have been properly allocated

The column will show all zeros (-) when you have fully and properly allocated your stipend amounts over the pay periods

*You can now follow the same steps starting at 6e (keeping in mind that you will allocate different amounts per pay period than the given example)

6e. Make selections as necessary in the OPTIONAL FEES section
6i. There are predefined Optional Fees you can select to pay for (C52:C54)
6j. You can add additional fees you wish to pay for (C55:C56) adding the amount you wish you to pay (F55:56)

Section 1

TUITION FELLOWSHIP (if applicable)	Differential Tuition Fellowship	Index 240017	Amount $ 9,525.00						

6.

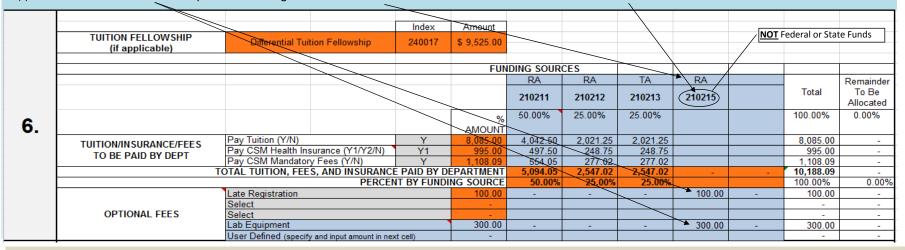|			FUNDING SOURCES						
			RA	RA	TA			Total	Remainder To Be Allocated
			210211	210212	210213				
		%	50.00%	25.00%	25.00%			100.00%	0.00%
		AMOUNT							
TUITION/INSURANCE/FEES TO BE PAID BY DEPT	Pay Tuition (Y/N)	Y / 8,085.00	4,042.50	2,021.25	2,021.25			8,085.00	-
	Pay CSM Health Insurance (Y1/Y2/N)	Y1 / 995.00	497.50	248.75	248.75			995.00	-
	Pay CSM Mandatory Fees (Y/N)	Y / 1,108.09	554.05	277.02	277.02			1,108.09	-
	TOTAL TUITION, FEES, AND INSURANCE PAID BY DEPARTMENT		5,094.05	2,547.02	2,547.02	-	-	10,188.09	-
	PERCENT BY FUNDING SOURCE		50.00%	25.00%	25.00%			100.00%	0.00%
OPTIONAL FEES	Select	-						-	-
	Select	-						-	-
	Select	-						-	-
	User Defined (specify and input amount in next cell)	-						-	-
	User Defined (specify and input amount in next cell)	-						-	-

6k(I). You can then allocate the expenses entering in new RA/TA classifications and new index numbers

Section 2

TUITION FELLOWSHIP (if applicable)	Differential Tuition Fellowship	Index 240017	Amount $ 9,525.00						

NOT Federal or State Funds

6.

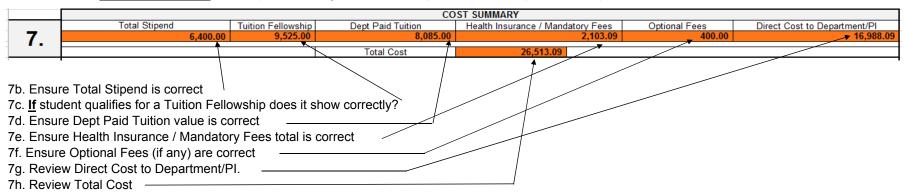|			FUNDING SOURCES						
			RA	RA	TA	RA		Total	Remainder To Be Allocated
			210211	210212	210213	210215			
		%	50.00%	25.00%	25.00%			100.00%	0.00%
		AMOUNT							
TUITION/INSURANCE/FEES TO BE PAID BY DEPT	Pay Tuition (Y/N)	Y / 8,085.00	4,042.50	2,021.25	2,021.25			8,085.00	-
	Pay CSM Health Insurance (Y1/Y2/N)	Y1 / 995.00	497.50	248.75	248.75			995.00	-
	Pay CSM Mandatory Fees (Y/N)	Y / 1,108.09	554.05	277.02	277.02			1,108.09	-
	TOTAL TUITION, FEES, AND INSURANCE PAID BY DEPARTMENT		5,094.05	2,547.02	2,547.02	-	-	10,188.09	-
	PERCENT BY FUNDING SOURCE		50.00%	25.00%	25.00%			100.00%	0.00%
OPTIONAL FEES	Late Registration	100.00	-	-	-	100.00	-	100.00	-
	Select	-						-	-
	Select	-						-	-
	Lab Equipment	300.00	-	-	-	300.00	-	300.00	-
	User Defined (specify and input amount in next cell)	-						-	-

6l(I). If the indices used in TUITION/INSURANCE/FEES section **are not** Federal or State funded research indices you can allocate OPTIONAL FEES to those indices

Section 3

TUITION FELLOWSHIP (if applicable)	Differential Tuition Fellowship	Index 240017	Amount $ 9,525.00						

6.

			FUNDING SOURCES						
			TA					Total	Remainder To Be Allocated
			210215						
		%							
		AMOUNT							
TUITION/INSURANCE/FEES TO BE PAID BY DEPT	Pay Tuition (Y/N)	Y / 8,085.00	8,085.00					8,085.00	-
	Pay CSM Health Insurance (Y1/Y2/N)	Y1 / 995.00	995.00					995.00	-
	Pay CSM Mandatory Fees (Y/N)	Y / 1,108.09	1,108.09					1,108.09	-
	TOTAL TUITION, FEES, AND INSURANCE PAID BY DEPARTMENT		10,188.09	-	-	-	-	10,188.09	-
	PERCENT BY FUNDING SOURCE		100.00%					100.00%	0.00%
OPTIONAL FEES	Late Registration	100.00	100.00	-	-	-	-	100.00	-
	Select	-						-	-
	Select	-						-	-
	Lab Equipment	300.00	300.00	-	-	-	-	300.00	-
	User Defined (specify and input amount in next cell)	-						-	-

7

"COST SUMMARY"
SECTION 7.

SECTION 7 view based upon previous entries/selections:

7a. Review the "**COST SUMMARY**" section (this section gives totals, not specific indices or percent effort)
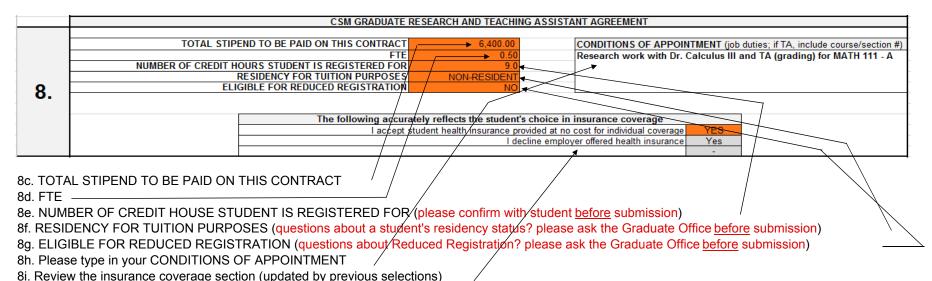
	COST SUMMARY					
7.	Total Stipend	Tuition Fellowship	Dept Paid Tuition	Health Insurance / Mandatory Fees	Optional Fees	Direct Cost to Department/PI
	6,400.00	9,525.00	8,085.00	2,103.09	400.00	16,988.09
			Total Cost	26,513.09		

7b. Ensure Total Stipend is correct
7c. **If** student qualifies for a Tuition Fellowship does it show correctly?
7d. Ensure Dept Paid Tuition value is correct
7e. Ensure Health Insurance / Mandatory Fees total is correct
7f. Ensure Optional Fees (if any) are correct
7g. Review Direct Cost to Department/PI.
7h. Review Total Cost
7i. If any values are incorrect, you must check your selections/entries in the previous sections.

8

"CSM GRADUATE RESEARCH AND TEACHING ASSISTANT AGREEMENT"
SECTION 8.

SECTION 8 view based upon previous entries/selections:

8a. Review the "**CSM GRADUATE RESEARCH AND TEACHING ASSISTANT AGREEMENT**" section

<mark>**8b. Please review this section, in particular, with your student!**</mark>

	CSM GRADUATE RESEARCH AND TEACHING ASSISTANT AGREEMENT		
8.	TOTAL STIPEND TO BE PAID ON THIS CONTRACT	6,400.00	**CONDITIONS OF APPOINTMENT** (job duties; if TA, include course/section #)
	FTE	0.50	Research work with Dr. Calculus III and TA (grading) for MATH 111 - A
	NUMBER OF CREDIT HOURS STUDENT IS REGISTERED FOR	9.0	
	RESIDENCY FOR TUITION PURPOSES	NON-RESIDENT	
	ELIGIBLE FOR REDUCED REGISTRATION	NO	

The following accurately reflects the student's choice in insurance coverage	
I accept student health insurance provided at no cost for individual coverage	YES
I decline employer offered health insurance	Yes
	-

8c. TOTAL STIPEND TO BE PAID ON THIS CONTRACT
8d. FTE
8e. NUMBER OF CREDIT HOUSE STUDENT IS REGISTERED FOR (please confirm with student before submission)
8f. RESIDENCY FOR TUITION PURPOSES (questions about a student's residency status? please ask the Graduate Office before submission)
8g. ELIGIBLE FOR REDUCED REGISTRATION (questions about Reduced Registration? please ask the Graduate Office before submission)
8h. Please type in your CONDITIONS OF APPOINTMENT
8i. Review the insurance coverage section (updated by previous selections)

9

"APPROVALS"
SECTION 9.
SECTION 9 view based upon previous entries/selections:
9a. Review the "**APPROVALS**" section
<mark>**9b. The entire form must be printed out, signed (at minimum by the student), and given in hard-copy form to HR.**
The signed form serves as the "Student Agreement" form from previous years.</mark>
9c. Send electronic Excel file to Student.Contracts@mines.edu

APPROVALS			
Approvals	Signature	Date	COMMENTS / ADDITIONAL INSTRUCTIONS
Clearas Mudd			
Dr. Abstract Calculus III			
Ever, Best (student) 10101000			

9. This Agreement is entered into by and between the Colorado School of Mines ("CSM") and the above-named student ("Student") on the dates set forth below. Student has been appointed to the position indicated and this Agreement reflects the terms of that appointment.

1. The parties acknowledge that the stipend payable hereunder is offered in return for the services described herein and is deemed taxable compensation. Any tuition subsidy, fee and health insurance payment noted herein shall be deemed an irrevocable, financial assistance award provided only for the purpose of aiding the Student in the pursuit of his or her study. The tuition subsidy is not conditioned upon the Student's provision of any services to CSM and will not, therefore, be deemed taxable compensation. The tuition subsidy may be eligible for exclusion under Section 117 of the Internal Revenue Code of 1986.

2. I understand that appointees are paid on a schedule defined at http://gradschool.mines.edu/GS-Assistantship-Policies#Term_of_Appointment. Contracts written for partial semesters are set up accordingly. Late contracts are set up for payment on the next available pay date.

3. The parties have read and agree to the terms and conditions of this appointment as set forth on https://inside.mines.edu/GS-Assistantship-Policies, and understand and agree that those terms are herein incorporated into this Agreement.

4. Individual terms of this appointment are set forth above. Nothing in this Agreement is construed as extending or enlarging this appointment beyond these.

5. The appointing department or program certifies that the student, department/division head or program chair and fund manager agree to the terms and conditions of this Agreement, that this signed Agreement is retained by the Department, and that the student has been given a copy of the signed form.

6. This appointment may be terminated by either party at any time for any reason. In the event of such termination and effective on the termination date, CSM will cease stipend payments for services not yet rendered. Any payments made hereunder prior to termination that constitute irrevocable financial aid will not be revoked, nor will the Student be required to repay such awards.

9d. Type in department contact name (first and last) B81 and add date F81
9e. Type in advisor/supervisor name (first and last) B82 and add date F82
9f. Student name will enter automatically, with CWID.
9g. Type in any comments / additional instructions
9h. Please also ensure the student reads the following terms:

This Agreement is entered into by and between the Colorado School of Mines ("CSM") and the above-named student ("Student") on the dates set forth below. Student has been appointed to the position indicated and this Agreement reflects the terms of that appointment.

1. The parties acknowledge that the stipend payable hereunder is offered in return for the services described herein and is deemed taxable compensation. Any tuition subsidy, fee and health insurance payment noted herein shall be deemed an irrevocable, financial assistance award provided only for the purpose of aiding the Student in the pursuit of his or her study. The tuition subsidy is not conditioned upon the Student's provision of any services to CSM and will not, therefore, be deemed taxable compensation. The tuition subsidy may be eligible for exclusion under Section 117 of the Internal Revenue Code of 1986.

2. I understand that appointees are paid on a schedule defined at http://gradschool.mines.edu/GS-Assistantship-Policies#Term_of_Appointment. Contracts written for partial semesters are set up accordingly. Late contracts are set up for payment on the next available pay date.

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