**SCHOOL OF ENVIRONMENTAL AND BIOLOGICAL SCIENCES**

**TA / GA APPOINTMENT INITIATION FORM**

 **New Appointment Reappointment Title Change Only**

**Employee Name**

**Department Name**

**Employee Supervisor**

**Student Mentor**

**TA GA Job Class Code Base Salary**

**AY CY Appointment**

 **From To**

 **% UDO Location Fund Type Business Line Account Cd Activity Cd**

**If Award Expired, please use this alternate fund source:**

**If Award Expired, NCE Approved Yes IPAS/Hold Received Yes**

 **\*\*\*Documentation Must Be Attached\*\*\***

**If Teaching,**

**Indicate**

**Course Name**

**and Section:**

**Preparer Date and/or Chair/Supervisor Date**