**GRADUATE ASSISTANTSHIP AWARD**

[Date]

ID # [ ]

[Mr./Ms] [Recipient Name]

[Street Address]

[City, State Zip]

Dear [Appropriate student name]:

I am pleased to offer you [For included new admit only: admission to the PhD/MA/MS/etc.] program and a Graduate Assistantship in the [insert name of the graduate program unit or other department] for the academic year [20XX-20XX]. This award carries a total value of [calculate and insert value]. You will receive a tuition award to cover [number of hours] semester hours for Summer 20XX, [number of hours] semester hours for Fall 20XX and [number of hours] semester hours for Spring 20XX. You will receive a stipend of [total amount of stipend] for the period [date if summer, otherwise Fall 20XX through Spring 20XX]. [Note newly admitted students summer award will be for the following summer, and in the subsequent year their letter must state: “This award includes hours and stipend previously awarded to you for Summer 20XX.”]

[For students eligible for Health Insurance Award (HIA):

Your award makes you eligible to receive a grant from TCU that will cover 80% of the cost of the student health insurance. You will receive a notification of the grant, the insurance coverage, and the election period for electing or declining the TCU student health insurance coverage. Students who do not elect within the specified period will not receive the grant.]

This graduate assistantship requires up to [20] hours of duties per week, as assigned and directed by [person who will oversee the duties or indicate how the student will be notified]. Outside employment for students holding financial awards carrying stipends is allowed. However, we ask that you receive counsel regarding how outside employment may impact your success in the program from the [can be dean of graduate program or dean of awarding unit or similar] prior to accepting outside employment opportunities. I hope this appointment will prove to be a valuable educational experience for you.

If you find your enrollment will be different from the hours/semester indicated above, please notify the graduate program coordinator in your field of study [or insert name here] as soon as possible. Note that you are responsible for tuition charges for any hours exceeding your tuition award. Remember that you are required to be on campus as a full-time student and to enroll for the requisite number of hours that enable you to continue regular progress toward completion of your degree requirements.

[For returning students:

To accept this appointment, please sign and return a copy of this letter. This offer is made under conditions described in the accompanying “Resolution Regarding Scholars, Fellows, Trainees, and Graduate Assistants” adopted by the Council of Graduate Schools in the United States to which TCU is a signatory.]

[For newly admitted students where the offer is also an offer of admission:

We would like to hear from you as soon as you make a decision regarding enrollment in our program but you must respond no later than April 15, 20XX. We may withdraw our offer if we have not heard from you by that time. This offer is made under conditions described in the accompanying “Resolution Regarding Scholars, Fellows, Trainees, and Graduate Assistants” adopted by the Council of Graduate Schools in the United States to which TCU is a signatory. By agreement of the member institutions of the Council of Graduate Schools (CGS), you are free to postpone your decision until April 15, or change your decision before that date. After that, you need a release from the program you have already accepted in order to accept an alternative offer. By accepting our offer, you also agree to abide by the terms and conditions outlined above.

To accept the admission offer and Graduate Assistantship appointment, please sign and return a copy of this letter to [my office]. If I do not hear back from you or receive a signed copy of this letter by April 15, I will presume you have declined the admission and appointment and it will be withdrawn.]

We recommend that you keep a copy of this signed letter for your records. If you have any questions regarding this award, please contact [professor name] at 817-257-xxxx or [professor@tcu.edu].

Yours truly,

[Name]

 [Associate Dean/ Dean/ Unit head of awarding unit]

cc: [Graduate Program director of student’s accepting program]

□ I accept the [admission offer and the] assistantship offer for the [20XX-20XX academic year].

□ I decline the offer.

Print Name Signature Date