

GRADUATE COLLEGE CONCURRENT APPOINTMENT APPROVAL REQUEST FORM
(For NIH, NSF, Beckman Institute and Other Federally Funded Trainees and Fellows)

STUDENT INFORMATION			
UIN	LAST NAME	FIRST NAME	MIDDLE NAME
EMAIL ADDRESS		DEPARTMENT	

AWARD INFORMATION			
NSF FELLOW	NIH TRAINEE	OTHER FELLOW/TRAINEE	_____
CONCURRENT APPOINTMENT REQUEST INFORMATION (Complete All That Apply)			
ASSISTANTSHIP	FTE % _____	PERIOD _____	FEDERAL OR STATE GRANT
			DEPARTMENT FUNDS
HOURLY	HRS/WEEK _____	PERIOD _____	NON-UNIVERSITY POSITION

CONCURRENT APPOINTMENT STATEMENTS (Advisor or DGS Must Initial All That Apply)
THIS CONCURRENT APPOINTMENT WILL NOT INTERFERE WITH, DETRACT FROM OR PROLONG THE STUDENTS APPROVED TRAINEESHIP OR FELLOWSHIP PROGRAM _____
THIS CONCURRENT APPOINTMENT WILL NOT EXCEED 25% (NSF & NIH Fellows/Trainees) _____
THIS CONCURRENT APPOINTMENT WILL NOT EXCEED 17% (Beckman Fellows) _____
COMPENSATION FOR THE PROPOSED RESEARCH ASSISTANTSHIP WILL NOT BE PAID FROM A RESEARCH GRANT THAT SUPPORTS THE SAME RESEARCH THAT IS PART OF THE TRAINEES PLANNED TRAINING EXPERIENCE _____

ADVISOR OR DIRECTOR OF GRADUATE STUDIES	GRADUATE PROGRAM INFORMATION
AUTHORIZED SIGNATURE: _____	CONTACT NAME:
DATE: _____	CONTACT EMAIL:
	CONTACT NUMBER:

DO NOT WRITE BELOW THIS LINE – FOR GRADUATE COLLEGE USE ONLY

APPROVED BY: _____	
DATE: _____	