UNIVERSITY of HOUSTON ISSS

UH - Office of International Student and Scholar Services - 203 University Center North - Houston, TX 77204-3024 - (713) 743-5065

Assistantship/Fellowship Verification Form

| complete the requested information as applicable and sign the form below. <i>Please call us at 743-5065 if your have any questions.</i> 1. Student's job title(s): R.A. T.A. Teaching Fellow Graduate Assistant Instructional Assistant Other 2. Total FTE for all graduate appointments: % 3. Student is employed by department. 4. Monthly pay is: x months per year for an annual total of Annual Insurance Stipend (if any) 5. Since R.A. and T.A. contracts/other positions are renewed or continued on an annual or semester basis, do y expect to renew the contract or continue the position if funding is available? Yes No | Stude | ent's Name | Student ID | Date | |
|---|-------|--|--|---------------------------------------|--|
| 2. Total FTE for all graduate appointments: | Dear | ⁻ Department, | | | |
| 2. Total FTE for all graduate appointments: | comp | need the following information to process immigration documents for the above-named student. In a plete the requested information as applicable and sign the form below. Please call us at 743-5065 | | | |
| 5. Since R.A. and T.A. contracts/other positions are renewed or continued on an annual or semester basis, do y expect to renew the contract or continue the position if funding is available? | 1. S | itudent's job title(s): R.A. T. Instructional A | A. □ Teaching Fellow Assistant □ Other | / ☐ Graduate Assistant | |
| 4. Monthly pay is: \$xmonths per year for an annual total of \$ Annual Insurance Stipend (if any) 5. Since R.A. and T.A. contracts/other positions are renewed or continued on an annual or semester basis, do y expect to renew the contract or continue the position if funding is available? | 2. T | otal FTE for all graduate appointments | s: % | | |
| Annual Insurance Stipend (if any) 5. Since R.A. and T.A. contracts/other positions are renewed or continued on an annual or semester basis, do y expect to renew the contract or continue the position if funding is available? | 3. S | student is employed by | | department. | |
| 5. Since R.A. and T.A. contracts/other positions are renewed or continued on an annual or semester basis, do y expect to renew the contract or continue the position if funding is available? | 4. N | //onthly pay is: \$ x | _ months per year for an an | nual total of \$ | |
| expect to renew the contract or continue the position if funding is available? | 1 | Annual Insurance Stipend (if any) _ | | | |
| Section A: Employing Department Signature Name (Please Print) Title Signature Date Section B: Fellowship Verification by Student's Enrolling Department (Dept. Major) 1. Is this student eligible to receive a Doctoral Student Tuition Fellowship (DSTF) that has been approved by the Academic College? | | | | | |
| Section A: Employing Department Signature Name (Please Print) Title Signature Date Section B: Fellowship Verification by Student's Enrolling Department (Dept. Major) 1. Is this student eligible to receive a Doctoral Student Tuition Fellowship (DSTF) that has been approved by the Academic College? □ Yes □ No Annual amount of DSTF? 2. Does the student receive any other fellowship or award to supplement tuition and living expenses? | 6. C | oes this position entitle the student to | | | |
| Section B: Fellowship Verification by Student's Enrolling Department (Dept. Major) 1. Is this student eligible to receive a Doctoral Student Tuition Fellowship (DSTF) that has been approved by the Academic College? □ Yes □ No Annual amount of DSTF? 2. Does the student receive any other fellowship or award to supplement tuition and living expenses? | | Section A: I | | | |
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| Is this student eligible to receive a Doctoral Student Tuition Fellowship (DSTF) that has been approved by the Academic College? | Siç | gnature | Da | Date | |
| Is this student eligible to receive a Doctoral Student Tuition Fellowship (DSTF) that has been approved by the Academic College? | | | | | |
| the Academic College? | ; | Section B: Fellowship Verificat | ion by <u>Student's Enrolli</u> | ing Department (Dept. Major) | |
| 2. Does the student receive any other fellowship or award to supplement tuition and living expenses? | 1. | | | ship (DSTF) that has been approved by | |
| | | | | | |
| ☐ Yes ☐ No If yes, indicate typeAnnual total: \$ | 2. | Does the student receive any other fellowship or award to supplement tuition and living expenses? | | | |
| | | ☐ Yes ☐ No If yes, indicate ty | pe | Annual total: \$ | |
| Name (Please print)Title | | Name (Please print) | Tit | tle | |
| SignatureDate | | Signature | Da | ate | |
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