A yellow letter with black text

Description automatically generated with low confidence

**CHOOSE DATE**

**ENTER STUDENT NAME**

**ENTER STUDENT ADDRESS**

**ENTER STUDENT ADDRESS**

Dear **ENTER STUDENT NAME**:

Congratulations on continuing in the **DEGREE (M.S./M.A./etc.)** program in the **ENTER DEPARTMENT** at the University of Idaho. We look forward to helping you achieve your academic and career goals and are pleased to offer you a position as a part-time (10 hours/week) Graduate Research Assistant for the 2025-2026 academic year.

For this position, you will receive the stipend and tuition waiver/mandatory fee support listed below. Additional funds for health insurance, or scholarships you are eligible to receive, may be included as well.

**Stipend**

Stipend, with payments made every 2 weeks $**ENTER FULL YEAR STIPEND**

on the regular university payroll calendar.

**Tuition and Fees#**

Half in-state tuition and fees Fall and Spring Semester\* **$** **5,408**

Half out-of-state tuition Fall and Spring waived \* $ **9,618**

**Other Support**

Student Health Insurance through UI SHIP $**ENTER SHIP AMT. PAID**

Scholarships $**ENTER SCHOLARSHIPS**

**Total value of the assistantship** $**ENTER GRAND TOTAL**

\*One half of the tuition and fees above will be paid directly to your student account at the start of each term.

#Tuition amounts will be adjusted to the 2025-2026 tuition rates in April 2025. Mandatory fees are those charged with regular tuition. Other fees such as international student fees, program fees, and lab/course fees are the students’ responsibility.

*Please note part-time assistantships cover only half tuition and fees and students are responsible for the other half unless scholarships are indicated above.*

**Include the following here: Description of position/responsibilities; faculty member who will be advising and/or mentoring the student; start and end date; number of work hours per week; etc. If not covered by the department/program, mention that the student must maintain student health insurance either through the university or through and outside vendor policy.**

We are excited to have you to our program. Please, inform me of your acceptance of this offer by signing this agreement below and returning it to the above address no later than **ENTER DATE**. This letter constitutes an official offer, and your acceptance indicates your firm commitment to employment as a part-time (10 hours/week) **CHOOSE TA/RA/SA** in the **ENTER DEPARTMENT NAME/PROGRAM** for the 2025-2026 academic year under the terms of this letter.

FOR INTERNATIONAL STUDENTS ONLY. Failure to arrive by [**ENTER DATE]** (**can be up to ten days before the start date)** may result in your application and acceptance to be deferred to the following year, and funding may or may not be available.

Your initial appointment is contingent on funding and/or work to support the position, the completion of a successful criminal background check, and fulfilling the Terms of Employment as explained on the attached sheet.  Continuation of the assistantship is contingent on the availability of funding, satisfactory academic performance, satisfactory teaching and/or laboratory performance, and timely progress toward your degree. All graduate assistants must abide by the program and University’s policies and procedures. UI policies are available online in the [Faculty-Staff Handbook.](https://www.uidaho.edu/governance/policy/policies/fsh/1/1700)

**You must complete the I-9 process and have a successful criminal background check on file prior to beginning any work at the University of Idaho (see further instructions in the Terms of Employment document)**

The University of Idaho requires all full-time, on-campus, graduate students to have health insurance as a condition of enrollment. Students are **automatically** enrolled in the university health insurance program (SHIP). You may choose to rely on personal health insurance, but it must meet minimum coverage requirements to qualify. If you choose to use personal insurance, **you must OPT OUT of the SHIP** program through my.uidaho.edu before the first day of the term. See the following link for more information: [Student Health Insurance Program | University of Idaho (uidaho.edu)](https://www.uidaho.edu/current-students/student-health-services/ship)

The terms of your employment are subject to the Governing Policies and Procedures of the Regents of the University of Idaho and the policies and procedures of the University of Idaho including without limitation those in the Faculty/Staff Handbook and Administrative Procedures Manual as they exist or may be amended.

Again, if you have any questions or require additional information, you may contact me at the above address or phone number, or you may email me at **ENTER EMAIL ADDRESS**.

Sincerely,

**ENTER CHAIR’S NAME HERE**

Chair

cc: College of Graduate Studies

\*\*Delete this or add additional CC’s here.\*\*

**Terms of Employment**

The following are the terms of employment for **CHOOSE TA/RA/SA** at the University of Idaho for academic year 2025-2026.

1. Continuation of the assistantship after the first semester is contingent upon:
   1. satisfactory academic performance,
   2. satisfactory teaching and/or laboratory performance,
   3. timely progress toward your degree,
   4. continuation of the position and/or funding,
   5. abiding by the program and University’s policies and procedures.

UI policies are available on-line in the Faculty-Staff Handbook at [Faculty Staff Handbook (uidaho.edu)](https://www.uidaho.edu/governance/policy/policies/fsh) and Department policies are available at **ENTER WEBSITE** or below.

1. **ENTER LIST OF DEPARTMENT POLICIES AND PROCEDURES HERE IF NOT DIRECTED TO DEPARTMENT WEBSITE ABOVE**.
2. As a requirement of Human Resources and the College of Graduate Studies, employment as a Graduate Teaching/Research/Support Assistant is contingent upon your completion of a mandatory Teaching/Research/Support Assistant Institute. Please check the COGS website for more details: <http://www.uidaho.edu/cogs/admitted/resources/tatraining>).  The Institute, required of all part-time and full-time graduate assistants and located on the Moscow campus the Thursday prior to fall classes, is designed to improve the quality of your teaching/research/support requirements and your overall assistantship experience.

In addition, all international TAs must register for INTR 508, Teaching and Learning Strategies for International Teaching Assistants. There will be required workshops attached to this course throughout the Fall or Spring semester on CANVAS. Please Note: TAs in the English department will register for the department’s TA professional training and are excused from the COGS graduate assistant institute.

Exceptional or emergency circumstances that preclude attendance at the Fall or Spring workshop must be petitioned to the College of Graduate Studies ([cogs@uidaho.edu](mailto:cogs@uidaho.edu)).

1. If you are a new employee, an I-9 must be completed on or before your first day of work to verify that you are eligible to work in the United States. You will also need to visit Human Resources at 415 W. Sixth Street to complete your payroll paperwork within three days of your employment start date to ensure timely receipt of your first payroll check and to comply with federal regulations. Please, bring forms of identification with you to establish your identity, employment eligibility, and social security number. For examples of acceptable documents please check with Human Resources in advance. If you have any questions regarding payroll, visit [www.uidaho.edu/hrs](http://www.uidaho.edu/hrs) or e-mail [employment@uidaho.edu](mailto:employment@uidaho.edu).

I accept the offer for the position of **CHOOSE TA/RA/SA** for the academic year 2025-2026 in the **ENTER DEPARTMENT**, and I agree to the terms of this letter.

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Signature Date

I decline the offer for the position of **CHOOSE TA/RA/SA** for the academic year 2025-2026 in the **ENTER DEPARTMENT**

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Signature Date