

Departmental Graduate Assistantship Offer Letter

DATE

Name
2 No Where Rd
Departmental, GA 30002

Dear _____,

Congratulations! You have been selected to receive a **[teaching, research, or lab]** Assistantship for 2017-2018. Recipients are selected through a competitive process, and assistantships are awarded only to the University's most qualified individuals to aid them in their pursuit of study or research. Your assistantship includes \$XXXX for the work you will perform. If raises are approved by the State of Georgia, this amount may increase.

The estimated minimum value of your entire assistantship is _____ **[stipend and in-state tuition amount]** for an in-state or _____ **[stipend and out-of-state tuition amount]** for an out-of-state student. By accepting this assistantship, you will pay a reduced tuition fee of \$25 per semester instead of full tuition, which for the 2016-2017 year is \$4,246 for in-state students and \$12,045 for out-of-state students. To determine what impact, if any, this assistantship will have on your financial aid award for the academic year, please contact the Office of Student Financial Aid (OSFA) at 706-542-6147 or osfa@uga.edu. This is strongly encouraged for students who receive this letter after July 1.

You will be obligated to pay mandated student fees. For spring 2017, these are \$1,135 and will cover the services of the University Health Center and Ramsey Student Center for Physical Activities as well as transportation, athletic, technology, and activity fees. International students also will be required to pay an International Student Compliance Fee (not tracking fee) of \$62 per semester. For further information on tuition and fees, please see http://www.bursar.uga.edu/tuition_fees.html.

All students on assistantship are required to have health insurance and mandatory health insurance premiums will be deducted from your assistantship paycheck unless you qualify to opt out of the University System's health insurance plan. Further information on health insurance is available at <http://www.hr.uga.edu/students>.

You will have a **[13 minimum / 20 max]** hour per week work obligation to the department. Your work obligation will begin on _____ and end on _____. Your assignment for your assistantship duties will be defined by **[faculty member or dept head]**. **[Optional: Your**

duties will include...] [If applicable: *Contingent upon satisfactory academic progress, work performance, approval of your department, and continued funding by the State of Georgia, your award will be extended for the following(semester, year)*] If you have questions about your work obligations, please contact [**contact information**].

You must register for a minimum number of graduate credit hours for each semester when accepting an assistantship award. For fall and spring semesters, the minimum is 12 credit hours. For summer semester, the minimum is 9 credit hours.

I sincerely hope you will accept this offer of an assistantship, and I wish you success at UGA. Please inform us of your decision by signing and returning one copy of this letter to [Name] at [Address] no later than [Date].

Sincerely,

Member (PI) or Dept. Head

Dept. Head or Dean Faculty

Accepted:

Declined:
