Graduate Assistants - Letter of Appointment Template *Please note Admissions information is no longer included in this template. You will need to send this information separately.

Name

Address

City-State, Zip

Date

Dear <__>,

The <Department/College of > at Florida State University is pleased to inform you that you have been selected for a departmental assistantship with the following class title and code: < class title and code> for the <X> (academic year, calendar year, or semester), and your employment supervisor will be <supervisor>. You will be responsible for < general description of duties >. The assistantship carries with it a stipend amount of <stipend amount>, which will be disbursed on a biweekly basis, resulting in an average biweekly pay of <biweekly rate amount>. In addition, it provides a tuition waiver up to < X> credit hours for the <X> fall and spring semester and <X> credit hours for the summer semester (specify if out-of-state fee waiver will be covered). The departmental assistantship offer is for an average of <X> hours per week, < FTE %>, beginning <M/D/Y and ending M/D/Y>, and will be under the < employment unit>.

This assistantship is contingent upon you providing Florida State University required documentation of employability and upon approval to work following successful completion of all university and statutorily required screenings. Additionally, this assistantship/appointment is subject to the Constitution and laws of the State of Florida and the United States, the regulations of the University and the Florida Board of Governors, and the Collective Bargaining Agreement between Florida State University and the United Faculty of Florida – Florida State University – Graduate Assistants United (UFF-FSU-GAU). No Department or University Representative may make a binding agreement to reappoint you for longer than the term of the contract (for teaching assistants, you must include a statement that teaching assistants are required to meet certification and qualification requirements to obtain teaching status). Continuation of funding is contingent upon academic progress in the program and fulfilling the obligations of the assistantship. All graduate assistants at FSU work under a contract negotiated by the UFF-FSU-GAU and Florida

State University Board of Trustees. UFF-FSU-GAU is the labor union certified as the exclusive bargaining agent for graduate assistants at FSU. To find out more information about the UFF-FSU-GAU, or join their action newsletter, visit http://www.fsugau.org or email info@fsugau.org. Florida State University is an equal opportunity employer. Prior to the start of your appointment, you should become especially familiar with the University policies on non-discrimination, non-retaliation, and sexual harassment (https://hr.fsu.edu/sites/g/files/upcbnu2186/files/PDF/Publications/diversity/EEO_Statement.pdf).

Please review the departmental assistantship offer below and the academic fee schedule provided for you. Since the offer is based on 20__-20__ tuition rates, the rates may change. Please refer to the enclosed **Fact Sheet** which covers other important information or visit http://studentbusiness.fsu.edu/ for updated tuition, fee rates and other cost estimates. The Graduate Assistant Tuition Plan is offered year-round to all Graduate Assistants employed by FSU to defer the due date for tuition and fees until the end of the term. For added convenience, plan participants can also enroll in payroll deductions. This plan applies to tuition and class fees only and does not change the due date of any other charges the graduate assistant might owe to FSU. Detailed information on the plan is available on the Student Business Services website.

FSU requires that all prospective graduate assistants enrolling full-time must show proof of health insurance before they can register for classes. A University-sponsored health insurance plan is available for purchase from our health center. **A health insurance subsidy is also offered to graduate assistants towards the university-sponsored health insurance plan. The subsidy is based on your FTE and citizenship – please see Fact Sheet for details and rates.**

Please note that only this written offer is binding. Research grants, advisor's promises, and departmental agreements are not binding.

Sincerely,

<X>

_____ _____

Appointer Signature/Acceptance Date

Assistantship Offer Estimate Based on Tuition Rates for 20__-20__

FSU FUNDING OFFER

Please review the assistantship offer and academic fee schedule provided for you below. Department funding is available for _____ semester(s) subject to satisfactory academic progress and continued availability of funds. Students are expected to enroll in _____ credits during each semester of this appointment (Modify as applicable). Please note that tuition rates and fees are subject to increase.

Table 1: FSU Funding Offer				
	Fall 20XX	**Spring 20XX**	**Summer 20XX**	**Total**
Academic Department Funding * The stipend is provided directly to the student as a bimonthly salary (with taxes and health insurance premiums withheld); waivers post to the student's my.FSU account and have no cash value. (Don't remove columns. Add N/A or $0.00 if the student isn't funding for a term)				
Assistantship Stipend	$	$	$	$
Tuition Waiver (In-State)	$	$	$	$
Tuition Waiver (Out-of-State)	$	$	$	$
Supplemental Funding (e.g. fellowship or one-time additional scholarship, etc.)	$	$	$	$
Additional FSU Funding * The Graduate School pays an insurance stipend, but students must pay the remaining insurance cost themselves (see below). (Please use the Graduate School's website to determine the appropriate annual rate using the student's residency status and FTE. The annual amounts are split between the fall and spring semesters. Include the appropriate corresponding rate in each semester box below.)				
Graduate School Insurance Subsidy for < FTE %>	$	$ *Students are required to maintain continuous health insurance coverage during enrollment at FSU. Summer insurance is automatically included in the spring/summer insurance payment.		$
Total FSU Funding	$	$	$	$

STUDENT'S FINANCIAL RESPONSIBILITY

Although the department provides you with a tuition waiver as listed above, you are responsible for paying the academic fees each semester you are enrolled, as well as your portion of the health insurance cost. The estimated academic fee for 2025-2026 is <$75.81 for in-state students/$108.87 per credit hour for out-of-state students>. Additionally, a $20.00 facilities use fee is charged each semester, and a $5.00 university card fee is charged fall and spring semester. Academic fees are subject to increase. Based on an enrollment of __ credit hours each semester, your total estimated academic fees each semester are as follows.

Table 2: Student's Financial Responsibility				
	Fall 20XX	**Spring 20XX**	**Summer 20XX**	**Total**
Paid to FSU (Don't remove columns. Add N/A or $0.00 if the student isn't funding for a term)				
Academic Fee (In-state/Out-of-State)	$	$	$	$
Facilities Use Fee	$	$	$	$
University Card Fee	$	$	N/A	$
Student's portion of **estimated** health insurance (Adjust as necessary based on FTE)	$	$ *Students are required to maintain continuous health insurance coverage during enrollment at FSU. Summer insurance is automatically included in the spring/summer insurance payment.		$
Estimated Out-of-Pocket Cost to Student	$	$	$	$

_____ _____

Appointee Signature/Acceptance Date

Enclosure/s: Fact Sheet, Council of Graduate Schools Resolution