



Assignment of Assistantship Duties
Graduate Assistant (Research)

Graduate Assistant:	UCID:
Faculty/Department:	Researcher:
Appointment Start Date:	Appointment End Date:
Total Appointment Hours	Hours per Week:
	Hourly Pay Rate:
Accounting Information:	

If this is a Revised AoAD form, please indicate which sections have changed:

Description of Duties (Please provide a brief description below):

Acceptance

By signing this, you acknowledge that you have reviewed the Assignment of Assistantship Duties form and that you agree it represents a reasonable distribution of all hours and responsibilities expected, and that it also complies with the Collective Agreement between the Graduate Students' Association and the University of Calgary.

Graduate Assistant: _____ Date: _____

Researcher: _____ Date: _____