



432 Western Avenue, Albany, NY 12203-1490

1.800.637.8556

www.strose.edu

Graduate Assistantship Contract 2023-2024

Name: _____

Student ID: _____

GA Placement: _____

GA Supervisor: _____

I accept this offer for a graduate assistantship.

I decline this offer for a graduate assistantship.

Please initial next to the statements below to verify that you understand the GA Policies & Procedures and that you have watched and understand the GA Orientation.

INITIAL

_____ I have read and agree to the Graduate Assistantship Program Policies and Procedures.

_____ I have watched and understand the Graduate Assistantship Orientation Prezi.

_____ I have reviewed the FERPA Training Presentation and taken the FERPA Quiz on SharePoint.

Signed: _____

Date: _____

Print Name: _____

Telephone: _____

E-mail: _____

Once complete, please print this form, initial, sign and return with the completed FERPA form to the Graduate Admissions

Office. Mailing Address: Office of Graduate Admissions, 432 Western Avenue, Albany, New York 12203 -OR-

Physical Address: DeSales Hall, 919 Madison Avenue, Albany, New York 12203 -OR-

Email: halbina@strose.edu

*****If you are anticipating a refund from your GA, you will need to contact the Office of Financial Aid to understand the timing of this refund and its effect of on your financial aid**