



NORTHERN ARIZONA UNIVERSITY

Graduate College

Graduate Assistant Personnel Action

GAPA Form

Use this form for changes from the original appointment, early termination, extension of an appointment, and one time pay or additional work situations. Select one situation and complete the box.

NAME _____ **Empl ID** _____

DEPARTMENT _____

COMMENTS: _____

Change From		Change To	
Begin / End Date		Begin / End Date	
Position #:		Position #:	
Area/Org:		Area/Org:	
Hrs/Wk:		Hrs/Wk:	
Total Stipend \$		Total Stipend \$	
		Is this position Safety/Security Sensitive? <input type="checkbox"/> Yes. Refer to NAU Policy 1.085 for more information.	

Job code determines payment of graduate assistant benefits

Job Code: 110 Teaching assistant <input type="checkbox"/>	Job Code: 110 Teaching assistant <input type="checkbox"/>
210 Research assistant <input type="checkbox"/>	210 Research assistant <input type="checkbox"/>
310 Service assistant <input type="checkbox"/>	310 Service assistant <input type="checkbox"/>

One time pay and additional work must have attached copy of prior written approval from Graduate College

Additional Work or One Time Pay		Extend Appointment	
Begin / End Date		Begin / End Date	
Position #:		Position #:	
Area/Org:		Area/Org:	
Hrs/Wk:		Hrs/Wk:	
Total Stipend \$		Amount to be Paid \$	
Are duties Safety/Security Sensitive? <input type="checkbox"/> Yes Refer to NAU Policy 1.085 for more information.			

Early Termination	Last Day Worked
End Date	Last Day on Payroll
Position #:	Area/Org:

Initiator: _____ **Phone** _____

Required Signatures: _____

Department: _____ **Phone:** _____ **Box:** _____

Dean/Director: _____ **Box:** _____ **Date:** _____

Sponsored Projects: _____ **Box:** _____ **Date:** _____

Graduate College Use Only

Graduate College: _____ **Date:** _____ **Box:** _____

Benefits Add: _____ **Benefits Removed:** _____

Tuition Remission: _____ **Tuition Remission:** _____

Insurance: _____ **Insurance:** _____

Residency _____ **GROT:** _____ **Residency:** _____ **GROT:** _____

Entered Date _____ **Posted Date** _____ 3/25