



Grant Research Assistant Recommendation and Contract

Office of Sponsored Projects | Administration Room 101 | ENMU Station 2

Recommendation

Student name: _____

Department: _____ Station number: _____

Email: _____ Contact number: _____

I recommend this student be granted a contract extending from _____ / _____ / _____ to _____ / _____ / _____
Month Day Year Month Day Year

at a total stipend of \$ _____ charged to account number: _____

Supervisor/project director should provide a detailed description of research assistant's responsibilities (please include grant name(s), supervisor's name and average number of work hours per week):

Approval Signatures

Grant project director _____ Date _____

Department chair _____ Date _____

College dean _____ Date _____

Graduate dean _____ Date _____

Office of sponsored project _____ Date _____

Student Response

- I accept this assistantship offer and agree to complete the duties as assigned. I certify that I currently am or will be registered for classes at ENMU during the semester in which I am a research assistant.
- I decline this offer.

Student signature _____ Date _____