

Approval for Employment in Addition to an Assistantship

Graduate students who receive a stipend from Virginia state funds via an assistantship are occasionally permitted to accept JMU employment in addition to the assistantship. Permission for such employment must come from The Graduate School, in response to approval by the student's program director or advisor. The student and director or advisor should carefully consider the effect of additional employment on the student's academic performance. Students cannot be paid for work until it is approved. Under the Affordable Care Act, non-fulltime employees may work no more than 29 hours per week. Most Graduate Assistantships are considered to require 20 hours of work per week. **Additional employment should be approved prior to work completion and the number of hours worked in any given week should total 29 hours or less.** Payroll will not process a pay for a student holding an assistantship until permission is granted by The Graduate School.

Date of request: _____

Student Name: _____ Email: _____

Graduate Program: _____

Graduate Program Director Name: _____ Email: _____

Assistantship hiring department: _____

Average number of hours worked weekly in the assistantship: _____
(A typical assistantship is counted as 20 hours per week.)

Department in which the additional employment is requested: _____

Employment will be ongoing weekly; Number of hours on average to be worked weekly in additional employment: _____; Date on which employment will begin _____.

Employment will be one time or occasionally; Number of hours to be worked in total for additional employment: _____; Date on which employment will take place _____.

All signatures are required for approval.

Student Signature _____ Date _____
"I understand the limit on hours of employment in addition to my assistantship as required by JMU in light of the ACA."

Graduate Program Director /Advisor Signature _____ Date _____
"I approve this student's request to work another job in addition to his/her assistantship."

Assistantship Supervisor Signature _____ Date _____
"I approve this student's request to work another job in addition to his/her assistantship."

Director of Graduate Student Financial Support _____ Date _____

Please submit this form with all required signatures to The Graduate School, MSC 6702, fax 568-7860, or email.