POLICY COVER SHEET
(See Faculty Staff Handbook 1460 for instructions at UI policy website: www.webs.uidaho.edu/uipolicy)

Faculty/Staff Handbook [FSH] □ Addition x Revision* □ Deletion* □ Emergency
Minor Amendment □
Chapter & Title: 1565 Academic Ranks and Responsibilities  (section H-2.b only)

Minor Amendment □
Chapter & Title:___________________________________________________________

All policies must be reviewed, approved and returned by a policy sponsor, with a cover sheet attached to apm@uidaho.edu or fsh@uidaho.edu respectively.

*Note: If revision/deletion request original document from apm@uidaho.edu or fsh@uidaho.edu, all changes must be made using “track changes.”

Originator(s): John K McIver 9/18/12
(Please see FSH 1460 C)
Name Date
Telephone & Email: 885-6689 jmciver@uidaho.edu
Policy Sponsor: (If different than originator.)
Name Date
Telephone & Email:
Reviewed by General Counsel  X Yes No Name & Date: Kent Nelson 9/7/12

I. Policy/Procedure Statement: Briefly explain the purpose/reason of proposed addition, revision, and/or deletion to the Faculty/Staff Handbook or the Administrative Procedures Manual.

To better define what constitutes a Graduate Student Research Assistantship, and to clearly differentiate the work of an RA from a Teaching Assistantship (TA).

This policy change has been reviewed and approved by the Research Council.

II. Fiscal Impact: What fiscal impact, if any, will this addition, revision, or deletion have?

None expected

III. Related Policies/Procedures: Describe other policies or procedures existing that are related or similar to this proposed change.

None

IV. Effective Date: This policy shall be effective on July 1, or January 1, whichever arrives first after final approval (see FSH 1460 D) unless otherwise specified in the policy.

January 1, 2013

If not a minor amendment forward to: ________________________________

Track # ____________
Date Rec.: ___________
Posted: t-sheet __________ h/c __________ web __________
Register: ______________
(Office Use Only)

Policy Coordinator
Appr. & Date:
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