UNIVERSITY of ILLINOIS ATSPRINGFIELD

Assistantship Supervisor's Reappointment Endorsement

Please submit completed form to the GA Office in PAC 515.

Your current Assistant has requested reappointment for the next academic year. Reappointments are not automatic, but assistants are typically reappointed for a second academic year if they have met the requirements of their positions, received satisfactory performance evaluations, and meet the academic eligibility requirements of the Graduate Assistantship Program. Reappointments are also contingent on the availability of funding. Please review the information below and indicate whether you approve the request for reappointment. Assistant's Name: _____ Assistant's UIN: ____ Assistantship Unit: _____ Primary Assistantship Supervisor:____ Supervisor's Statement (please check one): I approve the reappointment of my current assistant to this position for the next academic year. I do not approve the reappointment of my current assistant to this position for the next academic year. for the following reasons (if this option is selected, please place this form in a sealed envelope marked "confidential" before forwarding it to the Graduate Assistantship Office): Signature of Assistantship Supervisor Date