



PhD in Population Health Sciences

Environmental Health | Epidemiology | Global Health & Population | Nutrition | Social & Behavioral Sciences

RESEARCH ASSISTANT REQUIREMENT FORM

Use this form to allocate RA hours towards the Guaranteed Extended Research Funding. Review this form with the PI, finance /grant manager, and your faculty advisor, obtaining her/his signature before submitting to the the field of study academic administrator. After their approval and sign off, the field of study will notify the PHS office of their decision, in which the PHS office will sign off as acknowledgment and file the form appropriately.

STUDENT INFORMATION

Student Name: _____ HUID: _____

Advisor Name: _____ Year Entered Program: _____

Field of Study: EH EPI GHP NUT SBS

RESEARCH INFORMATION

Principal Invesitgator: _____ Hourly Rate: _____

Finance/Grant Manager: _____ Dates of Employment: _____ - _____

2.5 credits I choose to allocate _____ hours of my time, which equals 2.5 credits toward the funding requirement. **5.0 credits** I choose to allocate _____ hours of my time, which equals 5.0 credits toward the funding requirement.

Use the following box to provide a short description of the research work and funding source:

Student Signature: _____ Date: _____

PI Signature: _____ Date: _____

Finance/Grant Manager Signature: _____ Date: _____

OTHER REQUIRED SIGNATURES

Advisor Signature: _____ Date: _____

Field of Study Signature: _____ Date: _____

PHS Program Signature: _____ Date: _____