

**RESEARCH ASSISTANTSHIP COMMITMENT FORM**

Both Research Assistant and Faculty should sign and keep a copy of this form (with all signatures); submit the other to your Macaulay Advisor. Return the original via mail, fax, email (scanned), or hand delivery to:

Attention: Research Assistantship  
Macaulay Honors College  
35 West 67<sup>th</sup> Street, New York, NY 10023  
Fax: 212-580-8130  
E-mail: [Gianina.chrisman@mhc.cuny.edu](mailto:Gianina.chrisman@mhc.cuny.edu)

**PART I. FACULTY INFORMATION**

Name: \_\_\_\_\_ Number of research assistants you are hiring: \_\_\_\_\_

Department and School: \_\_\_\_\_

Are you providing your own funding for this position? (not required) Yes No

**PART II. RESEARCH PROJECT INFORMATION**

Start Date: \_\_\_\_\_ End Date: \_\_\_\_\_

Approximate number of hours per week: \_\_\_\_\_ Title of Project: \_\_\_\_\_

**PART III. STUDENT INFORMATION**

Name: \_\_\_\_\_ Campus: \_\_\_\_\_

EMPLID: \_\_\_\_\_ Graduation Year: \_\_\_\_\_

Cell Phone: \_\_\_\_\_ Email: \_\_\_\_\_

*Note: For this program, students may request Opportunities Fund payment for hours completed, pending Macaulay Advisor approval. At the completion of the project, both faculty and student will be required to verify the number of hours worked.*

**To all students:** will you request payment from your Opportunities Fund for this position at a rate of \$10 per hour, \$1,000 maximum per project during the fall/spring semester; \$2,000 maximum per project during the summer semester? Yes No

**PART IV. PROFESSOR/RESEARCH ASSISTANT COMMITMENT**

The student and faculty have discussed expectations, job duties, outcomes, hours, and general conduct and department in the workplace. Both agree to write a two-page description of the work accomplished and jointly present the work at Macaulay Honors College.

Signed (faculty) \_\_\_\_\_ Date: \_\_\_\_\_

Signed (student) \_\_\_\_\_ Date: \_\_\_\_\_

**PART V. MACAULAY ADVISOR APPROVAL**

*Note to student: Along with this form, signed by you and the faculty researcher, bring a copy of the description from the website for your Advisor's approval.*

**Macaulay Advisor approves the student as follows (check all that apply):**

- to participate in the Research Assistantship
- to receive academic credit pending department approval
- to receive monies from the Opportunities Fund

Signed (Advisor) \_\_\_\_\_ Date: \_\_\_\_\_