**Research Associate Request & Justification**

Date:

To: CALS Human Resources

From: <Name>

The <Center/Department/Unit Name> requests to appoint a research associate primarily to pursue advanced training (which will augment their degree) per the following information below:

Name:       Funding:

Start date:       Pay Rate:

End date:       Operational Area:

FTE:       Visa Status:

Empl. ID (if applicable):       Total Prior Training\*:

Degree Emphasis and Conferring Institution:

Conferral or Thesis Defense Date:

Explain the specific experience or training the individual will gain relevant to their degree:

Explain new skills and knowledge the individual will gain relevant to their degree:

The department understands that for extension requests beyond appointment year 3 and 4, Dean’s level approval is required for each of these additional years. Extension approvals will not exceed 12 months per each request. In addition, the department understands that extension requests beyond the 5th year of the appointment, requires UW-Madison’s Office of Human Resources approval and is only granted for exceptional circumstances.

If you have any questions, please contact       at <Phone and/or Email>.

Attachments:

CV/Resume