

Request for Approval of Extra On-Campus Employment Hours

Instruction Sheet

As per the Faculty Handbook, Section 3, Article 7.1.e, full-time graduate students" must limit their paid University employment to a maximum of 520 hours per year, with a maximum of 240 hours per academic term. This includes all paid employment on campus including Graduate Teaching Assistantships and Research Assistantships."

<u>Note:</u> This form is <u>not required unless</u> the total hours of all on-campus employment exceeds the regulation as stated above.

Instructions:

- 1. Complete all sections of the following documents:
 - a. On-Campus Employment Summary
 - b. Plan/Timeline to maintain degree progression
 - c. Request for Approval of Extra On-Campus Employment Hours details
- 2. In collaboration with your supervisor, develop a plan/timeline of how you will maintain progress in your degree given the request for additional hours. Within your plan, address ALL components in your degree requirements from the point of entry to convocation. Please see Page 3 for instructions.
- 3. Acquire signatures on the Request for Approval of Extra On-Campus Employment Hours form (student, Supervisor (if applicable), GPD, FGSPA).
 - a. You may need to submit the form to your program's GPAC for assistance.

Submission Checklist:	
On-Campus Employment Summary	
Plan/Timeline for Maintaining Degree Progression (attach as separate document)	
Request for Approval of Extra On-Campus Employment Hours form	

Please submit all completed documents (this package (page 1 – 4) AND the Plan/Timeline for Maintaining Degree Progression) to <u>graduatestudies@brocku.ca</u>.



On-Campus Employment Summary

ALL SECTIONS MUST BE COMPLETED:		
Employee Number:	Student Number:	
Last Name:	First Name:	
Email Address:	Graduate Program:	
Defined Length of Program (ie. total # of tern	ns): Number of Current term:	
Academic Year: May to April		

Please provide the following for <u>all</u> on-campus employment, including the extra hours requested, in order of academic term (Spring/Summer, Fall, Winter)

- Position title (e.g. Teaching Assistant, Exam Invigilator, etc.)
- Appointment dates (e.g. May 2024 August 2024)
- Total number of contracted hours (e.g. 120)

Position Title	Appointment	Appointment	Total # of
(if applicable, specify course(s))	Start Date	End Date	Contracted Hours
Teaching Assistant (e.g. SOCI 1P91)	May 2024	June 2024	120



Plan/Timeline for Maintaining Degree Progression Instruction Sheet

In collaboration with your supervisor, develop a plan/timeline of how you will maintain progress in your degree given the request for additional hours. Within your plan/timeline, please include the following:

- List <u>ALL</u> components in your degree requirements from the point of entry to convocation. For each component listed include:
 - o Name of component (e.g. course completion, proposal development, etc)
 - Anticipated/planned start and end date (e.g. Data Collection December 2024 to February 2025)
 - Explanation of how you will maintain progress within the term, and beyond, given the request for extra hours

SAMPLE PLAN/TIMELINE

This is a guideline: other formats are acceptable so long as they include all required components of your degree and all required information for those components as listed above.

TERM	PROGRESS	PLAN
Fall 2024	 Coursework Completion of (list courses) Thesis Proposal and Ethics Application Finalize thesis proposal draft 	 Bi-weekly meetings with supervisor to check-in and discuss feedback on draft thesis proposal Submit ethics application and complete any revisions based on feedback from the REB
Winter 2024	 Data Collection Finalize data collection parameters Begin data collection for samples A – D 	Dedicate specific time blocks dedicated to collected required data
Spring/Summer 2025	Data Analysis	 Begin analysis, compile data, and draft report of preliminary findings Review preliminary findings and draft report with supervisor



REQUEST FOR APPROVAL OF EXTRA ON-CAMPUS EMPLOYMENT HOURS

ALL SECTIONS MUST BE COM	ИPLETED:	
Term(s) Additional Hours reques		number of extra hours that exceed the
Spring/Summer Term:	Fall Term:	Winter Term:
Total additional hours request ac	cross all terms:	
Position title/description:		
Course Number (if applicable):	Сог	ırse Duration:
these additional hours will not impe	de my timely completion	
under the authority of The Brock University	your personal information. The po Act, 1964, and in accordance with iversity and its programs and ser	nature Date Date
		tra on-campus employment hours, approve to monitor their progress in their program.
Supervisor Name	Signature	Date
By signing below, you have reviewed and support the student in taking or		/timeline to maintain degree progression ployment hours.
Graduate Program Director Name	Signature	Date
Faculty Associate Dean Name	Signature	Date
DEAN (Faculty of Graduate Studie	es and Postdoctoral Affai	rs) OR DESIGNATE:
Dean (FGSPA) or Designate Name	Signature	Date