Date:	_
Name:	EWU ID:
Address:	_
Address:	_
Address:	_
Dear	
Upon the recommendation of	, I am pleased to offer
you a graduate service appointment (C	GSA) for the 2023-24 academic year. This appointment is
offered on a competitive basis to stude	ents of outstanding promise. The appointment includes a

Enrollment	Operating Tuition*	Building Fee	Student & Activity Fee	Total EWU Tuition Bill	Student Responsibility
8 credits	\$3,101.24	\$79.43	\$195.46	\$3,376.13	\$274.89
9 credits	\$3,488.90	\$89.36	\$219.90	\$3,798.16	\$309.26
10 credits	\$3,876.55	\$99.29	\$244.33	\$4,220.17	\$343.62

resident operating tuition fee waiver of up to 18 credits per quarter. All remaining tuition is your

responsibility. All fees are your responsibility.

This waiver does not apply to any self-support programs, online accelerated programs, or correspondence courses. In addition, you will be paid an hourly rate of at least ______ per hour. This wage is subject to change if you are assigned to a grant funded research assistantship.

^{*}GSA Waiver Covers Operating Tuition Only

You are expected to work an average of 20 hours per week. Documentation of all hours worked will be submitted. Your supervisor will determine actual dates of appointment. The terms of your appointment are further defined by EWU Academic Policy 303-22 (Graduate Students), EWU Policy 407-01 (Temporary Employment) and the attached GSA information sheets. Please review this information carefully before deciding to accept or decline the award. This is not a decision on your admission, and this offer is contingent upon your admission to EWU Graduate Studies.

GSA health insurance is offered at a reduced rate. EWU will contribute up to \$1,000 per academic year (Fall, Winter, Spring) to be paid quarterly to eligible GSAs who choose to enroll in GSA health insurance. These GSAs are responsible for GSA health insurance costs in excess of the quarterly EWU contribution.

When you have decided, check the appropriate box below, sign and return a copy, retaining the information pages for your records. A reply is required by _______; otherwise, the offer will be withdrawn and made to another student. Your early response would be helpful in planning for the coming year; however, we respect your privilege to wait two weeks. Please direct questions about your academic program to your program advisor or program coordinator. For questions about the financial aid, and/or the impact of your GSA appointment on available financial aid, please contact the Financial Aid Office at 509.359.2314 or finaid@ewu.edu

Congratulations on the high opinion our faculty members have of your past work and your promise for continued academic success. We look forward to your enrollment in Graduate Studies at Eastern.

Sincerely,			
Please choose to ac	=	er under the terms described	d in this letter and in
ACCEPT	DECLINE		
(Signature)		(Date)	