



# STUDENT ASSISTANTSHIP (UCC 301)

This is a three-page form!

Courses should be approved and added *before* the end of the drop/add period for on-ground courses (generally, the first week of classes).

Name of Student	Banner ID#	Term & Year
-----------------	------------	-------------

The above-named student has permission to register for \_\_\_\_ (1-3) credits of UCC 301 in

\_\_\_\_\_ (Course prefix and number, e.g. AGE 101).

*Student must have passed this course with a minimum grade of B in order to be eligible to participate in UCC 301. Student must have junior or senior standing (≥57 credits earned on transcript). Student must be in good academic standing. Credits vary and are not determined by the credits for the course for which the student is assisting. **May be taken only once for credit**, regardless of the number of credits assigned to the assistantship.*

### Student's Record:

**Grade student received in course listed above when s/he took it as a student:** \_\_\_\_\_

**# Credit hours passed, total:** \_\_\_\_\_

(See "Earned Hours" column on transcript) \_\_\_\_\_

**Cumulative GPA:** \_\_\_\_\_

**# Credit hours passed in major:** \_\_\_\_\_

**Major GPA:** \_\_\_\_\_

**ATTENTION:** Student must read the below and sign the form, approving any charges associated with this course and agreeing to payment information. Form may be submitted to the Registrar's Office on paper, fax, or scanned and emailed.

- The Registrar's Office will notify me at my Utica University e-mail address of any problems with this registration. If I have a hold on my account, I will not be registered for the assistantship. If adding this course will exceed my maximum hours, I will need to request an increase of my maximum hours or drop a course.
- I accept responsibility for ensuring that all courses for which I register are appropriate to my degree program and for the accuracy of all information I submit to the University.
- I accept responsibility for all charges incurred as a result of my registration and that charges and registration are available for viewing on Banner Web.
- If charges are incurred while attending and it should be necessary for Utica University to use a collection agency, which is subject to the Fair Debt Collection Practices Act, I agree to pay all collection costs and attorney's fees.
- In the event I qualify for Title IV federal funds, I authorize the University to use these funds to pay for all allowable charges beyond tuition, fees, room and board. I understand that due to federal regulations, my financial aid package is based upon a minimum registration requirement after drop/add period. If minimum requirements are not met, I will not be eligible for certain aid programs and will be responsible to pay any balance in full prior to participating in future registration periods or the release of transcripts.
- Traditional campus students who do not pay the balance in full will be automatically enrolled in a payment plan and charged a deferred payment fee.
- If I fail to meet payment arrangement deadlines, I will experience delays in finalizing my registration, I may be dropped from my courses, and if applicable, may be removed from campus housing and have my meal plan canceled.
- **WITHDRAWING:** I agree to notify the Registrar's Office in writing of any withdrawal, or other change that affects my enrollment status in any class or be subject to all charges. Academic deadlines are posted on the University website. Links are available from the Registrar's home page: [www.utica.edu/registrar](http://www.utica.edu/registrar) If I withdraw after the deadline, I will be given a grade of WF, which will calculate as an "F" in my GPA.

*Continue to page 2/reverse*

**Student/Faculty Approvals**

**Instructor Name\*** (PRINT): \_\_\_\_\_

**Instructor Signature:** \_\_\_\_\_

Date: \_\_\_\_\_

**Chair/Director Signature:** \_\_\_\_\_

Date: \_\_\_\_\_

**Dean's Signature:** \_\_\_\_\_

Date: \_\_\_\_\_

**Student's Signature:** \_\_\_\_\_

Date: \_\_\_\_\_

\*NOTE: Faculty member who will be the instructor of record for UCC 301. UCC 301 is not credited toward an instructor's reduction of load.

**Instructor Use Only**

Total number of hours per week the student will spend on responsibilities: \_\_\_\_\_

Will the student make class presentations? \_\_\_\_\_ If yes, how many? \_\_\_\_\_

Will the student have access to the engage shell of the course? \_\_\_\_\_ If yes, what content will they have access to:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Tutoring duties, if any, will be as follows:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Describe other duties:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Method of evaluating the student's performance (be specific, e.g., number of frequency of meetings with supervisor, amount and kind of written work, etc. Attach another sheet, if necessary):

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Registrar Office Use Only**

**CRN:** \_\_\_\_\_

**Date Student Registered by Registrar's Office:** \_\_\_\_\_

**Initials:** \_\_\_\_\_

## Student - FERPA Statement of Understanding

Security and confidentiality of student educational records are a matter of concern for all individuals who have access to files or computerized data bases maintained by Utica University. Any data base containing student data may be covered in part or in whole by the Family Educational Rights and Privacy Act of 1974.

The Family Rights and Privacy Act (FERPA) was enacted to protect the privacy of students and their education records. Each person working with education records in any format, including handwritten, print, type, film, electronic materials, etc., holds a position of trust and must recognize the responsibility of preserving the security and confidentiality of the information. In your role, you are expected:

- To read the FERPA information available on the Office of the Registrar website:  
<http://www.utica.edu/academic/registrar/ferpa.cfm>.
- Not to seek personal benefit or permit others to benefit personally by any confidential information which has come to you through your work assignment(s).
- Only access information to which you have been given authorized access.
- Must not use another person's system/user ID/password/data without permission.

I have read the FERPA information on the Registrar's website. I understand that by virtue of my assistanship position with Utica University, I may have access to records which contain individually identifiable information, the disclosure of which is prohibited by the Family Educational Rights and Privacy Act. I acknowledge that I fully understand that the intentional disclosure by me of this information to any unauthorized person could subject me to criminal and civil penalties imposed by law. I further acknowledge that such willful or unauthorized disclosure also violates Utica University policy and could constitute just cause for disciplinary action.

Signed \_\_\_\_\_ Date \_\_\_\_\_

Print Name \_\_\_\_\_