# OFFICE OF SPONSORED RESEARCH

# GEF (Grant Employment Form)

**Date**:

|  |  |  |  |
| --- | --- | --- | --- |
| **Name**: |       | **TCU ID#**: |       |

**Will be employed under a grant/contract in the capacity indicated below**:

[ ]  Principal Investigator [ ]  Research Assistant

[ ]  Project Director [ ]  Administrative Assistant

[ ]  Research Scientist [ ]  Other

[ ]  Research Associate

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| Beginning Date: |       | Ending Date: |       | Total Pay Periods: |       |

|  |  |
| --- | --- |
| **Base Salary**: |       |
|  |  |
| **The amount of time employee will devote to this project during this period is**: |       |
| (percent of time, hours to be reported, etc.) |  |
|  |  |
| **Total amount committed**:  |       |

[ ]  *is* [ ]  *is not* in addition to the employee’s salary

[ ]  9 months/12 payments [ ]  12 months/12 payments [ ]  12 months/26 payments

|  |  |
| --- | --- |
| **Rate of Pay**:  |       |

[ ]  Monthly [ ]  Biweekly [ ]  Hourly

The grant/contract [ ]  *will* [ ]  *will not* pay retirement benefits

The employee [ ]  *is* [ ]  *is not* a student

|  |  |  |
| --- | --- | --- |
| Office Use Only: |  | TCU |
| Account |       | Department |       |  |
|  |  |  |  |  |  |  |
| OSR  |       |  |  |  | Fund |       |  |  |
|  |  |  |  |  |  |  |
| ORA  |       |  |  |  |  | Project |       |  |
|  |  |  |  |  |  |  |
| Payroll  |       |  |  |  |  |  |  |  |
|  |  |  | Signature |  |  |

 Approved by:

 Associate Provost