THE UNIVERSITY OF

ALABAMA

Date

To Whom it May Concern:

This letter is to verify that (Student’s Name)\_\_\_\_\_\_\_ is currently pursuing study at The University of Alabama in (Department Name)\_\_\_\_\_\_\_\_\_Department and working toward their doctorate/master’s degree.

As such, he/she is employed a graduate teaching assistant/ graduate research assistant each semester contingent upon their progress and performance. (Student’s Name) \_\_\_\_\_\_ began in our program in\_\_\_\_\_(Fall/Spring) semester of \_\_\_\_(Year) , and we expect their assistantship support to continue until they complete their graduate students, or at least through \_\_\_\_\_\_\_\_(month/year) provided they remain in good standing.

(Student’s Name) \_\_\_\_\_\_ is under the direction of Dr.\_\_\_\_\_\_(Name of student’s advisor) and is expected to continue in this program at the University until the completion of their degree.

The total amount of financial assistantship per academic year is as follows\*:

|  |  |
| --- | --- |
| Tuition for the fall/spring semesters (based on out of state rates): | See MOA |
| Total stipend for the fall/spring semesters: | See MOA |
| Negotiated rates for Health Insurance for one year | See MOA |

If you require additional information, you may contact our department at \_\_\_\_\_\_.

Sincerely,

 (signature)

Name

Title

\*these rates are subject to change and based on the current rate of tuition, insurance, and current stipend.