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All departments are required to use this template for **all PAF change requests** sent to the Graduate School and/or the Office of Research Administration.

*Note: This form cannot be used to extend current contracts. All extension requests must be submitted via a new contract.*

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**Last name, First name (EMPLID)**

**A) List current contract details:**

1. Effective month/day/year – month/day/year
2. \$ Biweekly stipend
3. Account code(s) \*\*include 100% or percentage distribution between accounts
4. Hours per/week
5. Job title (TA, RA, AA, or Fellow)

**B) List all items that are changing:**

1. Effective month/day/year – month/day/year
2. \$ New biweekly rate
3. New account code(s) \*\*include 100% or new percentage distribution between accounts
4. Change to hours worked
5. Change of job title (TA, RA, AA or Fellow)

Submitted by:

Budget Approval

Date Submitted:

Date

Notes: