



DEPARTMENT OF

African American Studies

PRINCETON UNIVERSITY

REQUEST FOR FACULTY RESEARCH ASSISTANCE FUNDING

NAME:		DATE:
EMAIL: _____@Princeton.edu		PHONE #:
RESEARCH ASSISTANT'S NAME:		UNIVERSITY ID#:
APPROXIMATE NUMBER OF RESEARCH HOURS REQUESTED:		
PLEASE PROVIDE A FULL DESCRIPTION OF THE RESEARCH THAT YOU WILL BE ASSIGNING TO THE ASSISTANT.		

The AAS faculty member is responsible for selecting an undergraduate or graduate student to perform the requested research assistance. In consultation with the payroll office, the students will be compensated at a rate of \$12 - \$15 per hour. Each faculty member is eligible to receive up to \$2,000 funding every other year and will not be eligible to receive funding in two consecutive years. Funding is available on a first come, first served basis.

(AAS office use only)

APPROVED AMOUNT: _____

Signature: _____ **Date:** _____

Comments:

Requests must be submitted via campus mail or emailed to:

April Peters
105 Stanhope Hall
aprilp@princeton.edu