(on department letterhead)

Month Day, 20XX

Dear Mr./Ms/Miss APPLICANT,

Congratulations! We are delighted to inform you that the Department of XXXX can offer you the following fiscal support package. Should you accept this offer, you will be appointed to Dr. XXXXXXX as your supervisor. The offer includes the following:

* Appointment as a Graduate Research/Teaching/Service/Administrative Assistant (GRA/GTA/GSA/GAA) for 19/13/10 hours per week for 4.5 months/9 months/12 months. As a student employee, you will earn PhD: $9,375/$18,750/$25,000; MS: $5,625/$11,250/$15,000 during your appointment period.
* Tuition and Fees: To be paid directly on your behalf and cover 9 credit hours in Fall and Spring, and 3 credit hours in Summer up to a maximum of $11,350 (Optional – delete if does not apply)
* Student Health Insurance: Up to $3,313 package through UT System Student Health Insurance Plan (Optional – delete if does not apply)
* Competitive Scholarship: $1,000 that will provide in-state tuition eligibility (Optional – delete if does not apply)
* Stipend: $XX,XXX to assist with living expenses (Optional – delete if does not apply)

This financial package represents approximately $XX,X00.00 in support and is provided for 4.5 months/9 months/12 months. This support is provided only to students without outside employment. Note that receipt of this award may be taxable and may prevent you from obtaining other sources of financial aid. You should check with the Office of Student Financial Aid (https://onestop.utsa.edu/financialaid/) if you have questions.

This award is contingent upon you making satisfactory academic and research progress towards the completion of your degree requirements. In addition, you must meet the following requirements:

1. Be in good academic standing;
2. Maintain a minimum semester GPA and cumulative GPA of 3.0 for all coursework; and
3. Be enrolled at UTSA for a minimum of 9 semester credit hours during the fall and spring semesters and a minimum of 3 semester credit hours during the summer session.

With your signature and date, please indicate below if you are accepting or declining the financial support provided in this letter and return your decision to XXXX@utsa.edu (GAR or dept. admin) by (add a decision date). We appreciate receiving your decision from you by this date, so that we may extend the offer to other prospective students should you decide not to join us in the Fall/Spring semester.

Sincerely,

GAR or Chair

( ) I accept ( ) I respectfully decline the financial package offer:

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 (Signature) (Date)