**A logo of a university

Description automatically generated**

**College of Graduate Studies and Scientific Research**

**Part-Time Research Assistant Application Form**

|  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **Project Number** |  |  |  |  |  |  |  |  |  |  |  |  |

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| --- |
| **Project Title:** |

#### Type of Fund (Select one)

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Seed Research Grant (New faculty) | Competitive Research Grant | |  |  | | --- | --- | | Collaborative Research Grant with Public & Private Organizations |  | |

**Principal Investigator**

Full Name: College Department

|  |
| --- |
| Telephone : Fax: Email: |

**Research Assistant \***

Full Name:

Last Academic Qualification:

|  |
| --- |
| Telephone Email: |
| **Is the research assistant an AQU staff member or student?** ☐ Yes ☐ No   * **If Yes**: Please provide approval from their department and the dean of the college. * **If No**: Approval from the Human Resources Department is required. |
| **If the research assistant is an AQU student, please specify:**  Undergraduate  Graduate and Teaching Assistant  Graduate and not a Teaching Assistant |
| Expected working hours per week: Duration: Requested hourly rate\*\*: AED |

**Expected Duties of Research Assistant**

PI Full Name: Signature: Date:

**\* Please attach a CV of the research Assistant.**

**\*\*** **Bachelor Students shall be paid at the rate of AED 10 per hour, while students in their final year of study shall be paid at the rate of AED 15 per hour. Graduates shall be paid according to the table below.**

|  |  |  |  |
| --- | --- | --- | --- |
| **Qualification** | **Job Type** | **Maximum Hourly Wage (AED)** | **Maximum Weekly Hours** |
| Diploma | Data Collection | 25 |  |
| Bachelor's | Data Collection | 30 |  |
| Bachelor's | Data Analysis | 40 |  |
| Master's | Technical Specialist | 35 |  |
|  | Data Collection | 35 |  |
| PhD | Data Analysis/Inference | 100 |  |
|  | Technical Specialist | 75 |  |

**Approval of Chair of Research Department**

**Name: Signature: Date:**