Work Plan for Graduate Assistant  
Institute for Partnership to Eliminate Health Disparities

The purpose of this work plan is to provide guidance regarding the duties that should be completed by the graduate student(s) assigned to the Institute for Partnerships to Eliminate Health Disparities at University of South Carolina. Duties outlined in this document are subject to change, based on operational/personnel changes.

The IPEHD Deputy Director (Dr. Williams) will supervise the graduate assistant(s), with alternate contact person (Andrea Williams or Dr. Saundra Glover) who may serve as secondary supervisor(s) who will fulfill Dr. William’s duties when she is not available or when requested.

Supervisor(s) is/are:
Dr. Edith Williams, willi425@mailbox.sc.edu; 803-251-2225, 803-351-1624

Other Contact person(s) is/are:
Dr. Saundra H. Glover, sglover@mailbox.sc.edu; (803) 251-2297 or 803-391-6646
Andrea Williams, washing9@mailbox.sc.edu; 803-251-6303 or (803) 622-9114

Graduate Assistant Pay and Tuition Supplements
Students will be paid according to the USC’s recommended pay scale for graduate assistants. The IPEHD does not automatically award tuition supplements to graduate assistants. Tuition supplements may be provided during the fall and spring semesters, only if tuition supplement funds are available and budgets permit. No tuition supplements are provided during the summer term and our current federal funding (NIH and DoD do not allow the payment of tuition supplements).

Policies and Procedures
1. Students are eligible to work during the following pay periods in each year:
   - Fall Semester: August 16 – December 15
   - Spring Semester: January 16 – May 15
   - Summer Term: May 16 – August 15

2. Graduate Assistants are required to submit a written work schedule to the graduate assistant supervisor (Dr. Williams) by the end of the first full week of each semester.

3. Graduate Assistants are required to adhere to the agreed upon work schedule. If for some reason the graduate assistant is unable to work at a specific time, their supervisor should be notified, in advance and the work hours should be completed by the end of the following week. If the Graduate Assistant does not complete their work hours by the following week, funds will be reduced from their graduate assistantship financial award.

4. Graduate Assistants will report to their immediate supervisor for job duties, performance updates, and scheduling and other work-related business issues. Progress reports and monitoring of job performance (written reports and 1:1 conferences) will be arranged with the supervisor. Dr. Williams or her designee will outline job expectations and work assignments. The habitual failure to complete assigned work hours and assignments will result in termination.

5. IPEHD Staff meetings are held as needed. Graduate assistants are not required to attend staff meetings; however, graduate assistants are responsible for submitting a written progress report regarding the status of any assignments for that period. The report should include any questions that the student might have that should be addressed so that they can proceed with completing assignments.*
Specific Work Assignments*

Name: Pamela Ford

Current Appointment: **20 hours Doctoral level GA, January 16-May 15, 2011**

Source of support: TBA

Current Schedule: TBA

Current duties, tasks, assignments: **Manuscript and grant support for the Institute, specifically manuscripts with Dr. Jessica Bellinger, Dr. Lisa Wigfall, Dr. Crystal Piper, and potential leadership of vaccination coverage paper. You will also manage and regularly update the Institute’s manuscript matrix (current version attached), and you may be called upon to assist Larrell Wilkinson with SCOPE Project data analysis and interpretation of findings.**

Future Appointment: **TBD based on availability of funding and current productivity as assessed by supervisor and Institute Director.**

Questions, Concerns, and/or Needs:

Feedback from Institute Director:
I, _____________________________, have read and thoroughly understand my work plan and responsibilities to the Institute for Partnerships to Eliminate Health Disparities as a Graduate Assistant.

Student Signature____________________________________________________________

Supervisor’s Signature________________________________________________________

Date______________________________________________________________________