



APPLICATION FOR GRADUATE ASSISTANTSHIP

Page 1 of 2: This section must be completed by applicant.

NAME		STUDENT ID	
CURRENT ADDRESS			APT. NO.
CITY	STATE		ZIP
HOME PHONE	CELL PHONE	E-MAIL	
SEMESTER/YR ADMITTED	PROGRAM		

EDUCATION

COLLEGE/UNIVERSITY	LOCATION	DATES ATTENDED	DEGREE/MAJOR

WORK EXPERIENCE

EMPLOYER	LOCATION	DATES	POSITION

ACADEMIC HONORS/PROFESSIONAL ACTIVITIES/ SPECIAL SKILLS/AREAS OF EXPERTISE

HONORS	
ACTIVITIES	
SKILLS	

REFERENCES-Applicant is responsible for contacting the listed references and having letters of recommendation sent to the department to be forwarded to the graduate school in a complete application packet

NAME	TITLE	ADDRESS	TELEPHONE

How will this graduate assistantship further your career goals?

Applicant Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Applicant Name

Student ID

Appointment Requested:

New Appointment \_\_\_\_\_

Reappointment \_\_\_\_\_

Period of Appointment (semester/year):

To begin \_\_\_\_\_ / \_\_\_\_\_

Through \_\_\_\_\_ / \_\_\_\_\_

Amount of Assistantship \$ \_\_\_\_\_

Please enter account number to charge if not funded by graduate school.

Comments:

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Current Academic Status Regular \_\_\_\_\_ Provisional \_\_\_\_\_ (check one).

APPROVALS:

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Director of Master's Programs

Date

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Dean, College of Business

Date

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**NOTE:** The following supporting materials must be attached to this recommendation for GA & GRA application:

1. Student transcripts or grade reports (NEEDED FOR 1ST TIME APPOINTMENT AND BEGINNING OF ACADEMIC YEAR FOR REAPPOINTMENTS).
2. Three letters of recommendation (needed for first time appointments). Students should contact references to request letters.
3. Graduate Personnel Action Form (needed for EACH appointment).