

GRADUATE ASSISTANTSHIP:

Date: _____

Name: _____
Last First Middle

SSN: _____ Date of Birth _____

E-mail address: _____

Permanent Address: _____

Mailing Address: _____

Telephone: _____ Sex: _____ Race/Ethnic: _____

Major for Graduate School: _____

Have you been admitted into the program? Yes / No

In which department or office would you prefer to work? _____

- College of Education
662-846-4400
- College of Arts/Sciences
662-846-4100
- Athletic Department
662-846-4300

- College of Business
662-846-4200
- School of Nursing
662-846-4255
- Alumni / Foundation
662-846-4660

I am applying for a GA during [You can check more than one]:

() Fall 20____ () Spring 20____ () Summer I 20____ () Summer II 20____

Financial aid is provided to full-time students in the form of graduate assistantships. Through these assistantships, graduate students receive financial support while progressing toward a graduate degree. Full time students (9 semester hours) are employed part-time by a department, while pursuing the degree.

Signature: _____ Date _____

Please attach a resume and return this form to Graduate Studies.