GRADUATE ASSISTANTSHIP APPLICATION

(Please apply directly to the department or office offering the assistantship)



Please indicate department/office to which you are applying for an assistantship.

LEASE TYPE OR PRINT LEGIBLY Name:					
lamo	Last	First		MSU tech ID (if known)	
ddress:	Street	City	State	Zip	
Phone Numbers: ()				—r	
Current Graduate Program at N	MSU: First Term ir	Program: # of Credits	Completed: GPA:	-	
osition that you wish to apply	for (if known)				
cademic Background:					
ollege	Years Attended	Major	Degree	GPA	
ollege	Years Attended	Major	Degree	GPA	
ollege	Years Attended	Major	Degree	GPA	
Pertinent Work Experience:					
ompany/Institution		Type of Work		Dates of Employment	
ompany/Institution		Type of Work		Dates of Employment	
ompany/Institution		Type of Work		Dates of Employment	
References:					
 Name	Address	City, State,	Zip	Phone	
Name	Address	City, State,	Zip	Phone	
Name	Address	City, State,	Zin	Phone	
	, 100000	City, Oldic,	r		
ulletin. Graduate Assistants must	nents or offices in which you would like to we be registered for a minimum of six graduate	credits per semester. Separate applica	tion forms must be submitted for	each	
ssistantship for which application in r other information may be attached	is being made. Please check department rec ed.	uirements for additional materials to be	e enclosed with the application. A	resume, vita,	

Applicant's Signature:

Date:

Minnesota State University, Mankato is an Affirmative Action/Equal Opportunity University. This document is available in alternative format by calling the College of Graduate Studies at 507-389-2321 (V) or 1-800-627-3529 (MRS/TTY).