UNIVERSITY OF MISSOURI-ST. LOUIS Graduate School Assistantship Application

An Application for Admission to Graduate School must be submitted prior to this application. Any assistantship appointment is contingent upon admission to the Graduate School. **Submit this completed application form and a copy of your resume to your academic department.**

	I am submitting this application for a (please select all of interes □ Graduate Teaching Assistantship □ Graduate Research Assistantship				
Appli	icant Data	Graduate Assistantship			
1.	Academic Department Name				
2.	Semester and Year Applying for Assistant	tship			
3.	Maximum Number of Hours/ Week Availal	able to Commit to Assistantship			
4.	Applicant Name	First	Middle Initial		
5.	Student ID #				
6.	Address Street	City			
	State	Zip Code			
7.	Telephone Number				
8.	Email Address				
Quali	fications				
1.	What degree are you pursuing?				
2.	Do you expect to complete coursework on a full or part-time basis?				
3.	Please list two areas of growth you would like to cultivate as a graduate assistant.				
	1				
	2				

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4. Briefly state your career and academic objectives, and describe how an assistantship may support these objectives.

5.	Please describe any significant academic, professional, and volunteer experiences that can demonstrate your qualifications as an applicant (completed research, publications, teaching experience etc.).

15. Please provide contact information for three professional or academic references who can attest to your qualifications. These can be the same recommenders who were submitted with your application for admission.

Name	Title	Email Address	Telephone Number
Name	Title	Email Address	Telephone Number
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