

GRADUATE ASSISTANTSHIP APPLICATION

FORM F

PLEASE PRINT CLEARLY

Date _____

I hereby make application for a Graduate Assistantship in the Department of _____.

Students may only apply for a graduate assistantship in the department that offers the degree program the student is pursuing.

Name _____ WKU ID Number _____
Last First MI/Maiden

Ethnic Origin Black/African American White Hispanic/Latino Asian/Pacific Islander American Indian/Alaskan Native
(This information is voluntary and will not be used in making decisions regarding assistantship awards).

E-mail Address _____ Gender M F

Current Mailing Address _____
Street
City State Zip Telephone

Undergraduate College _____
Name of School Date Attended Degree earned

Graduate College (if any) _____
Name of School Date Attended Degree earned

Previous Work Experience _____

Other Relevant Experiences _____

REFERENCES At least three letters of professional recommendation are required by the Office of Graduate Studies by individuals who know the applicant and can attest to his or her qualifications for a graduate assistantship. If the letters are more than one year old or you apply for a different department, three new letters will be required.

Name	Organization	Position
_____	_____	_____
_____	_____	_____
_____	_____	_____

*According to Privacy Act of 1974, a student may voluntarily waive the right to access of confidential information such as letters of recommendation. Without the waiver the student will, upon request, be permitted to inspect letters of recommendation.

I do or do not waive my right of access to these letters.

Applying for (Choose only **ONE**) Fall Semester Only Spring Semester Only
 Summer Semester Only Academic Year (includes fall and spring semesters)

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ASSISTANTSHIP APPLICATION AND RECOMMENDATIONS MUST BE RECEIVED IN GRADUATE STUDIES BY THE FOLLOWING DATES:

- Fall Semester and/or Academic Year materials received by **June 30.**
- Spring Semester materials received by **October 15.**
- Summer session materials received by **April 1.**

Return to:
Office of Graduate Studies
Western Kentucky University
1906 College Heights Blvd.#11010
Bowling Green, KY 42101-1010

Signature _____ MM/DD/YYYY