



Graduate Assistantship Application

Date _____

WKU ID _____

Name _____
Last First MI/Maiden

Gender M F OTHER

Mailing Address

Street City State Zip Phone

Previous College (undergraduate or graduate)

1. _____
2. _____
School Degree Earned Date Attended

Previous Work Experience

Other Relevant Experiences

References

1. _____
2. _____
3. _____
Name Organization Position Contact Info

Privacy Act: *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 waive my right of access to these letters
- I do *not* waive my right of access to these letters

Applying for:

- Research Assistant
- Teaching Assist
- Graduate Assistant
- Asst. Instructor

Please visit the WKU graduate school web page to learn more about the [various types of assistantships](#)

ASSISTANTSHIP APPLICATION AND RECOMMENDATIONS MUST BE RECEIVED IN COUNSELING AND STUDENT AFFAIRS BY DEADLINE LISTED ON THE WEBSITE.

PLEASE CHECK HERE IF YOU ARE RECEIVING MILITARY EDUCATIONAL BENEFITS. A GA MAY JEPORDIZE THESE BENEFITS. _____

Signature (electronic)

Date

Please keep this form paperless. Fill this form, save it in your electronic device, and send it as an email

attachment to lacretia.dye@wku.edu.