

MISSISSIPPI STATE UNIVERSITY

Mississippi State, MS 39762

APPLICATION FOR GRADUATE ASSISTANTSHIP

(Return this application to the head of the department in which you wish to work.)

Legal Name: _____ MSU ID #: _____
(Last) (First) (Middle)

Current Address: _____
(Number, Street or PO) (City) (State) (ZIP Code)

Telephone: (Home) _____ (Work) _____ Fax: _____
Permission to call you at work: Yes No

E-Mail: _____ Date of Birth: _____ Sex: Female Male
Month Day Year

Have you been admitted to Graduate School _____ If yes, when _____
You must be admitted as a Classified graduate student to be eligible for this appointment.

Are you a Mississippi Resident: Yes No

List any special accommodation required due to physical disabilities

Major Field: _____

Minor Field: _____

Department: _____

Support Requested:
Graduate Research Assistantship
Graduate Service Assistantship
Graduate Teaching Assistantship
No Preference

Degree Sought: _____

Desired appointment beginning date:

Expected Graduation Date: _____

Fall _____ Summer I _____

Specialty Area: _____

Spring _____ Summer II _____

Please list below degree(s) already received:

Degree(s)	Date Received	Institution	Location
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

List names, addresses and telephone numbers of three references who would be able to evaluate your ability to complete work assignments.

Briefly describe your prior employment and additional qualifications such as design, writing, lab activities, etc. Briefly describe your future plans after completion of graduate work.

My signature confirms that all information supplied on this form is complete and accurate to the best of my knowledge. I understand that I may be ineligible for admission, enrollment or an assistantship by giving false information or omitting requested information.

Signed: _____

Date: _____

Mississippi State University does not discriminate on the basis of race, color, religion, national origin, sex, age, disability, or veteran status.