## **Graduate Assistantship Application Form**

Missouri State University An Equal Opportunity Employer

Please complete both pages of this application and **submit it to the department in which you are applying for an assistantship.** Completion of this general application form is **not required unless indicated in the** <u>GA opening</u> to which you are applying.

			Date		
Current Address		Permanent Address			
City/ State/ Zip		City/ State/ Zip			
		Permanent Phone Nu	ımber		
		M-Number			
lleges and Universit	ies a	attended.)			
Dates Attended		Area of Study	Degree/ Date		
ng:					
A		GPA on last 60 hours	of Course work		
A		GPA on last 60 hours	of Course work		
1		GPA on last 60 hours	of Course work		
	s in	GPA on last 60 hours  Professional Organ			
		Dates Attended	Permanent Phone Nu  M-Number  Illeges and Universities attended.)  Dates Attended Area of Study		

<b>T</b> //	ork	Ex	aeri	en	CE
* *	OIK	LA		CII	··

Signature

Position	Company	Dates of Emp	loyment	Duties
C				
eferenc	ees			
Naı	me	Position/ Title		Email Address and/or Phone Number
		<b>tion</b> (Please prov Graduate Assista		dditional information that you consider important to
our chipic	lyment as a	Graduate Assista	111.)	

Date