

**Western Connecticut State University
Academic Affairs
GRADUATE ASSISTANT APPLICATION**

Name: _____
Last First Middle

Address: _____
Street Apt.

City State Zip Code

Home Phone Number: _____ Cell Phone Number: _____

E-mail Address: _____

Undergraduate Institution: _____

Undergraduate Degree: _____

Date of Graduation: _____

Have you applied to a graduate degree program at Western? Yes ___ No ___

If yes, what degree program? _____

Have you been accepted to the program? Yes ___ No ___

Are you currently registered for courses? Yes ___ No ___ Current GPA _____

What department are you applying for the Graduate Assistantship? _____

For what semester are you applying? _____
Semester (Fall/Spring) Year

NOTE: Graduate Assistants are not eligible to work as student workers while being employed as a graduate assistant.

First time GA applicants please provide the following with your application:

* Resume

Student Signature Date