

GRADUATE ASSISTANT APPLICATION

Name:					
	First	Middle		Last	
Address:					
	Street			Apt.	
_	City		State	Zi	p Code
Cell Phon	e Number:		_ E-mail A	ddress:	
Undergra	duate Institution:				
Undergra	duate Degree:				
Date of G	raduation:				
Have you	applied to a graduate degre	ee program	n at Weste	rn? Yes No	
If yes, wh	at degree program?				
Have you	been accepted to the progr	ram? Yes	No		
Are you c	urrently registered for cours	ses? Yes	No	Current GPA*	
					*(returning GA)
What dep	partment are you applying fo	or the Grac	luate Assis	tantship?	
For what	semester are you applying?				
				Semester (Fall/Spri	ng) Year
NOTE: a)	Graduate Assistants are no as a graduate assistant	ot eligible t	to work as	student workers wh	ile being employed
b)	First time GA applicants m	ust submit	a resume	with application	
Student Signature			Date		