

Graduate Assistantship Application Form

Missouri State University An Equal Opportunity Employer

Please complete both pages of this application and **email to SAHE@MissouriState.edu along with your resume.**

Personal Information					
Name				Date	
Current Address			Permanent Address		
City/ State/ Zip	City/ State/ Zip		City/ State/ Zip		
Phone Number			Permanent Phone Nur	nber	
D '1 4 1 1			N/ N/ 1		
Email Address			M-Number		
	eate Colleges and Universit	ties		.	
Institution	Dates Attended		Area of Study	Degree/ Date	
Craduata Dagraa yay ara	nurquing				
Graduate Degree you are	pursuing.				
Academic Record					
Undergraduate Cumulati	dergraduate Cumulative GPA		GPA on last 60 hours of Course work		
Graduate Cumulative GP.	A				
Academic Honors, Me	emberships and Offices	s in	Professional Organi	zations:	

Position	Company	Dates of Employment	Duties
Referen	ces		

Name Position/ Title Email Address and/or Phone Number Placement Interests and Rankings (Please list the top 5 GA positions you

are most interested in, in order from most interested to least interested.)

important to your employment as a Graduate Assistant.)

Signature

Additional Information (Please provide any additional information that you consider

Date