

Murray State University Graduate Studies  
& ' , Graduate Assistantship  
Information Form

This application should be completed by students seeking graduate assistantship and delivered to the Office of Graduate Studies, Murray State University, P.O. Box 3000, Murray, KY 40302. Graduate Assistantships are available each year. 3 O H D U H Q U W B O H K F D S W H L Q R Z K D S S O \ I R U R X U J U D G X D W H S U R D I P

Please Print

Student Name \_\_\_\_\_  
(first name) (surname)

Local Address \_\_\_\_\_  
\_\_\_\_\_

Local Telephone \_\_\_\_\_ Cell Phone \_\_\_\_\_

Permanent Residence (Address) \_\_\_\_\_  
\_\_\_\_\_

Email: \_\_\_\_\_

Undergraduate Education:

Degree Earned: \_\_\_\_\_ Date Graduated \_\_\_\_\_ Undergraduate GPA \_\_\_\_\_

Undergraduate Major \_\_\_\_\_ Minor \_\_\_\_\_

Graduate Education:

Degree Currently Seeking \_\_\_\_\_ Major \_\_\_\_\_

Have you been awarded an Assistantship in the past? Yes No

If yes, when (semester/year)? \_\_\_\_\_ Who was supervisor? \_\_\_\_\_

When do you expect to complete your graduate degree (semester/year)? \_\_\_\_\_

I understand that general assistantship may be outside field of study (initial) \_\_\_\_\_  
I am seeking an assistantship for \_\_\_\_\_ semester, \_\_\_\_\_ (year).

Applicant Signature \_\_\_\_\_ Date \_\_\_\_\_