## **Application for Graduate Assistantship**

(Priority Deadline: April 2)

Name:		UTC ID:
Street:		City:
State:	Zip:	Phone #:

Graduate Degree Program (to be awarded a graduate assistantship you must be fully admitted and be a regular status graduate student)

<i>Type of Graduate Assist</i> Semester applying for (	1 1		Type of assistantship:	
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I will <u>only</u> accept:	Full-time (work 2	0 hrs/wk)	Part-time (work 1	0 hrs/wk)
	I will accept Full	or Part-time		
Other Employment Info I have other employment		No	Yes	
If yes, provide the follo	wing information:			
Type of employment	nt:	Num	nber of hours worked/week:	
Supervisor's name:		Phor	ne#:	
As a graduate assistan employment at UTC.	nt, you are obligated to repo Failure to report other em	ort to <u>The Gradu</u> ployment may je	uate School any additional, cur eopardize continuation of a gra	rrent or futu aduate

As a graduate assistant, you are obligated to report to <u>The Graduate School</u> any additional, current or future employment at UTC. Failure to report other employment may jeopardize continuation of a graduate assistantship. For information on the additional employment policy for graduate assistants see page 58 at <u>http://www.utc.edu/Administration/GraduateSchool/Resources/Include/documents/2011-2012Graduate-Catalog10-24-2011.pdf</u>

## Authorization of Information Release:

I authorize the release of my academic records for use by the hiring program/office and the Graduate School.

Signature

Date Application Submitted:

## **Required** Attachments:

A resume or additional information that includes relevant teaching, research or other experience appropriate to the graduate assistantship position.

## Instructions for submission:

Print this completed form, sign and attach resume or additional documents, then submit to the hiring program/office where the assistantship is located. Applications for programs in the College of Health, Education and Professional Studies must be submitted to Dr. Tony Lease, Hunter Hall, Room 215.