**Georgia College & State University   
Graduate Assistant Application**

Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  
                                    Last                                                              First                                                             Middle

GCSU ID Number:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_   Major: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Permanent Address:                                                    Local Address: (if different from permanent)

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_        \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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Local Phone Number: (\_\_\_\_) \_\_\_\_\_\_\_\_\_\_\_\_\_\_     E-mail Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Currently Enrolled?    \_\_\_\_ (Y) \_\_\_\_ (N) Term You Plan To Enter: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Colleges or Universities                 Dates                             Degree(s)                      Major Field  
         Attended                                                                    Received                         of Study

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 **Work Experience:** (Include research, teaching, tutoring, paper grading, industrial, farm and military.) Please attach resume if available.

        Dates                                     Employer                                                          Nature of Work

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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**Special Skills:** (Include computer experience) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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I hereby certify that the facts set forth in this application for a graduate assistantship are true and complete to the best of my knowledge. I understand that if I receive an assistantship, any falsified statement herein is considered sufficient cause for dismissal. I understand that information concerning past employment, references, education and other facts are subject to inquiry. I have read and understand the rules and regulations of an assistantship and the two-year time limit (six consecutive semesters). I agree to abide by the regulations governing the assistantship program.   
  
  
\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_                 \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  
Signature of Applicant                                                                                            Date

**Please submit the completed application along with a copy of your resume to:**

**Georgia College & State University**

**Graduate Programs in Business**

**Campus Box 19**

**Milledgeville, GA 31061**