STATEMENT OF INTEREST
and
APPLICATION FOR ASSISTANTSHIP

PLEASE COMPLETE AND RETURN THIS FORM TO THE GRADUATE SCHOOL ALONG WITH YOUR APPLICATION FOR ADMISSION.

NAME: _____
last first middle

ADDRESS: _____
street city state zip

STATEMENT OF INTEREST: In the space provided, describe your areas of interest. Also, indicate how the completion of this degree program will help you reach your career goals. (If more space is needed, please use reverse side of this form.)

APPLICATION FOR ASSISTANTSHIP. Please check one of the following:

_____ I do not wish to be considered for an assistantship

_____ I wish to be considered for a research assistantship

_____ I wish to be considered for a teaching assistantship

If you are applying for an assistantship, please list any research or instructional experience you have had. (Use reverse side of