



APPLICATION FOR ASSISTANTSHIP

NAME: _____
Last Name First Name Middle Name Suffix (Jr., Sr., III, etc.)

Social Security Number _____ - _____ - _____
(Optional – may be used to help with identification)

CURRENT ADDRESS (Present mailing address)

Number and Street City State Zip code Country

Local Telephone Number (_____) _____ Work/school Telephone Number (_____) _____

Electronic mail address (e-mail) _____

Current address, phone, and email valid until? _____

CITIZENSHIP AND RESIDENCY

Are you a citizen of the United States? Yes No If yes, are you a resident of South Dakota? Yes No

Are you a resident of MN? Yes No

If you are not a U.S. citizen;

- What is your country of citizenship? _____
- What is your country of birth? _____
- Are you a permanent resident? Yes No **Please attach a copy, front and back, of your green card form I-555**

If you are not a U.S. citizen or permanent resident, what is your visa status? _____

(If H1B, attach a copy of your visa, passport, and letter of approval from employer.)

What is your native language? _____ How many years have you spoken or studied English? _____

ACADEMIC HISTORY

Baccalaureate degree:

Institution Location Dates attended Degree Earned Date Earned

Undergraduate Major _____ Undergraduate Minor _____ GPA or equivalent (class, division) _____

Master's degree:

Institution Location Dates attended Degree Earned Date Earned

Official transcripts for all institutions from which you have earned degrees or expect to earn a degree should be sent directly to the Office of Graduate Studies and Research or enclosed in a sealed and signed envelope and submitted with this application.

Please list in **reverse** chronological order all institutions of higher education you have attended or are currently attending. You may attach additional pages if necessary.

| Name of Institution | Location or Branch | Dates Attended From To | Degree, Certificates, credits earned | Date Earned or Expected | Major Field |
|---------------------|--------------------|------------------------|--------------------------------------|-------------------------|-------------|
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REQUIRED STANDARDIZED TESTS: TOEFL is required for all international students whose native language is not English. **All test scores must be current.**

GRE (no more than 5 years old)

Date Taken: _____ OR Expected Test Date and Site: _____
General Test Score: Verbal: _____ Quantitative: _____ Cumulative (V+Q) _____ Analytic Writing _____

TOEFL (no more than 2 years old)
(For international/ESL students)

Date Taken: _____ TOEFL Score: _____ OR Expected Test Date and Site: _____

ACADEMIC HONORS:

In the space below, briefly describe any academic honors (prizes, scholastic recognition, scholarships/fellowships, membership in honorary societies), published works, and leadership activities you consider significant to your graduate study. Continue on separate sheet if necessary.

REFERENCES

Please list the three persons who are familiar with your educational or professional work and who have agreed to serve as references (please forward a recommendation to each of these references. These individuals should be able to evaluate your probable success as a graduate student. Completed forms should be sent directly to the Office of Graduate Studies and Research or enclosed in a sealed and signed envelope.

| NAME | ADDRESS | POSITION |
|------|---------|----------|
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| | | |
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Are you currently employed in the United States? Yes No

Name of employer? _____ Number of hours per week? _____

PLEASE ATTACH A RESUME.

CERTIFICATION AND SIGNATURE

I certify that the information on this form is complete, true and accurate. I understand that any misrepresentation or omission of facts in my application will justify denial or cancellation of admission to the university, before or after enrollment. I understand that the application and all credentials submitted in support of the application become the property of the University and will not be returned or forwarded to another institution. I also understand the information in the application will be shared with all members of the assistantship committee.

Signature _____

Date _____