

THE UNIVERSITY OF GEORGIA
HISTORY DEPARTMENT
Athens, Georgia 30602-1602
Tel. (706) 542-2053
Fax (706) 542-2455

APPLICATION FOR GRADUATE ASSISTANTSHIP

This application must be sent directly to the graduate coordinator's office in the history department, by the departmental deadline (see the History Dept. web site for details.)

Because we receive a high number of applications for admission, the general application for admission, application fee, official transcripts and official test scores must be received by the Graduate School by the department's deadline.

After a departmental screening process, Graduate School Assistantships are awarded and are granted for a period of one year.

Social Security # _____ E-mail _____ Date _____

Full Name

Ms/Mr. _____
(Circle One)

Home address

Present address

Address to which communication should
be sent after the award date.

Telephone number where you may be reached after the award date _____

I propose to work toward the (MA or PhD) _____ degree in History.

I have attended the following colleges or universities:

College Attended	Dates Inclusive	Degree Received
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

I am currently enrolled in The University of Georgia Graduate School: Yes _____ No _____

I am applying to be admitted to Graduate School for entrance _____ (Semester), _____ (year)

I have taken the GRE during the past five years, and my scores are listed below:

Graduate Records Examinations, Verbal _____ Quantitative _____ Writing _____

TOEFL, (if applicable) Score _____

I am planning to take the _____ test on _____
(Name of Examination) (Date)

(Continued on other side)

Honors and other evidence of scholarship:

The following three persons have been requested to submit references on my behalf directly to the Graduate School per the application instruction's (this is an on-line procedure.) Recommendations should be written by persons qualified to give judgment on the scholarly attainment and promise of the applicant. It is the applicant's responsibility to see that these recommendations are sent to the Graduate School by the department's deadline.

1. _____
2. _____
3. _____

If I accept a Graduate School Assistantship at The University of Georgia, I agree to abide by all policies and regulations, which apply to such assistantships.

(Signed) _____ Date _____

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