THE COLLEGE OF NEW ROCHELLE GRADUATE SCHOOL
GRADUATE ASSISTANTSHIP APPLICATION
Contract Year: July 1st – June 30th

DEADLINE: JANUARY 15th

LAST NAME:	**FIRST NAME:**
MAILING ADDRESS:	**E-MAIL ADDRESS:**
HOME TELEPHONE:	**CELL PHONE:**

Please check one:

_____ I *plan to* pursue a CNR Master's Degree in _____.

If you have not yet started your Master's Degree program, have you been accepted? ____ Yes ____ No

_____I *am already* pursuing a CNR Master's Degree in _____.

Please check one:

I am: _____ currently employed full time
_____ currently employed part time
_____ currently unemployed

I am employed at: _____

I currently work _____ hours per week

Have you previously received an award from The College of New Rochelle? Yes____ No____		
If yes, what award have you received?	Amount of Award	Semester and Year

Please indicate what office skills you possess:

List any extracurricular and/or community service activities in which you are involved:

**** On a separate page, please describe why you feel qualified to serve as a Graduate Assistant. This <u>statement of qualifications</u> must be submitted along with all other requires materials. ****

_____ _____

Applicant Signature Date

IMPORTANT INFORMATION:

- ✓ Please note that applicants will not be considered if the **completed** application packet is not received by the January 15th deadline date.
- ✓ Applicants must submit two sealed letters of recommendation with the application for the Graduate Assistantship; the letters submitted to Graduate Admissions for admission to the program may NOT be used.
- ✓ The student's overall GPA will be considered as of the deadline date. Please note that for those applicants without a GPA in the Graduate School, the **OVERALL** undergraduate GPA will be considered.
- ✓ Only those applicants with 30 credits remaining in their program as of the start of the contract year will be considered for the Graduate Assistantship.

Submit application, statement of qualifications, resume and two sealed letters of recommendation to:

Wendi Vescio, Associate Dean
The College of New Rochelle
29 Castle Place – Chidwick 103
New Rochelle, NY 10805

A student receiving an award should be aware that the award may reduce the student's loan funds. Scholarships are competitive. Monies allotted are dependent upon funds available.

Office Use Only:

Date Received: _____ Received By: _____

Application Form: _____ Resume: _____ Two Sealed Letters of Recommendation: _____

Interview: Yes _____ No _____ Interview Date and Time: _____