

Longwood University Graduate Assistantship Application

Name: _____
(Legal name as it appears on Social Security card.)

Longwood ID Number: _____

Contact Address: _____
(local address must be provided once enrolled)

Contact Phone: _____
(local phone must be provided once enrolled)

Contact Email: _____
(Longwood e-mail will be used for all contact once enrolled)

Admitted to Degree or Professional Endorsement program in: _____

Graduate Assistant Category Preferred:

- A)
 Teaching Assistant
 Research Assistant
 Academic Assistant

- B)
 Full-Time Position (9 credit hrs per term + 20 hrs per week)
 Part-Time Position (6 credit hrs per term + 10 hrs per week)

- C)
 Academic Year Position
 One Semester Position

- D)
Placement Preference

Education: _____

Employment History: _____

Skills/Qualifications: _____

Career/Education Goals: _____

I have read the Longwood University Graduate Assistant Policy and agree to abide by its terms.

Date

Signature