Graduate Assistantship Application Form Department of Chemistry, DePaul University

Date:			
Name:		Email:	
Phone (cell):		Address:	
First or Expected En	rollment Term:		
Projected Graduation Date:		(Month)	(Year)
Overall GPA:	(Undergrad	uate)	(Graduate)
Track of Study:	☐ MS Thesis	☐ MS Non-Thesis	
Teaching or Course	Assistant Experience:		
Course name	Responsibilities	Institution	Dates
Other Work Experie	nce:		
References: Please	include name, title, and co	ontact information below.	
1			
2			
☐ Check if transcript of GA determination	•	official transcripts are accept	able for the purpose
☐ Check if Personal :	Statement has been subm	itted.	
☐ Check if both lette	ers of recommendation ha	ve been submitted.	

GA_Application Rev 09/11/2012