

GRADUATE ASSISTANTSHIP APPLICATION

Please attach a copy of your resume and forward this assistantship application to:

Melissa Grant, Assistant Dean
Pace University, Office of Graduate Advisement and Student Development
One Pace Plaza
New York, NY 10038-1598 USA

Name Ms. Mr. _____
 Last First U Number

Present Address _____
 Street City State Zip Code

Permanent Address _____
 Street City State Zip Code

Day Telephone (_____) _____ Evening Telephone (_____) _____
 Area Code / Number Area Code / Number

Fax (_____) _____ E-mail _____
 Area Code / Number

Please indicate your anticipated entry term: Fall _____ Spring _____ Summer I _____ Summer II _____
 Year Year Year Year

Please indicate your intended location: New York City Westchester

Please indicate whether you are interested in a full-time or part-time assistantship: Full-time Part-time

Please indicate the Pace University degree program to which you are applying: _____

Undergraduate Institution _____

Undergraduate Major _____ Undergraduate Grade Point Average _____

Previous graduate institution, major, graduate grade point average (if applicable) _____

GMAT score Verbal _____ Quantitative _____ Total _____ Writing _____ Date _____ / _____ / _____
 Month Day Year

TOEFL score and date (if applicable) _____

On a scale from 1 to 5 (where 5 is excellent and 1 is poor), rate yourself on each of the following skills:

Programming		*Please List Software	
Specialized Software*			Typing
Quantitative Skills			Library Research
Communication/Writing Skills			Administrative Ability
			Internet Research

I understand and agree that my admission, if granted, my registration and continuance on the rolls and graduation are subject to all policies, rules, regulations, and procedures set forth in the current bulletins, catalogs, and other publications and notices of Pace University and as they may be amended, including but not limited with respect to scholarship, discipline, attendance, and payment or abatement of fees.

Signature _____ Date _____ / _____ / _____
 Month Day Year

APPLICANT: DO NOT WRITE BELOW THIS LINE.

Applicant Approved: _____ Not Approved _____
 Signature/Date Signature/Date

Assigned to: _____

Period of Assistantship: _____ Full Half