OAKLAND UNIVERSITY SCHOOL OF BUSINESS ADMINISTRATION

Graduate Assistantship Application

A limited number of graduate assistantships are awarded each academic year, on a competitive basis, to full-time students. Graduate Assistants work 20 hours per week and receive a monthly stipend and 9 credits of tuition per semester. Please consult the *Oakland University Graduate Catalog* for regulations governing assistantships.

To be considered for a Graduate Assistantship position for the Fall semester, return this application to the Graduate Business Programs office by <u>APRIL 1st</u> (This application will be kept on file to be considered for the <u>academic year</u> (September through April).

Please include an updated, relevant resume with this application. Without a resume, your application will NOT be considered.

Return application to:

Oakland University Office of Graduate B Elliott Hall, Room 23: 275 Varner Drive Rochester, MI 48309	8		
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Name			
Student ID Number	G		
Address			
City, State, Zip			
Phone Number			
Are you a United Stat	tes citizen? 🗆 Yes 🗆 No	In NO, Visa Type	
Colleges & Universities Attended		Location	Major/Degree
_	e Point Average It Average (if applicable)		
GMAT / GRE score	. ,		
TOEFL score (if applic	able)		
Program of Study	☐ MBA ☐ MAcc ☐	MSITM	
Semester you entere	d (or plan to enter) progra	ı m	
Number of Graduate	credits completed toward	any program (if any)	_
☐ Graduate Research A☐ ☐ Experiential Learning ☐ Either position – Grad	duate Research Assistantship	Ity with research projects ork on a special project for an are or Experiential Learning Innovati	
Have vou ever worke	d for Oakland University ((in any capacity)? \square Yes	∐ No

Computer Skills			
Statistical and Quantitative S	Skills		
Research Experience (i.e. Li	ibrary, Field, Data Processing)		
Other relevant experience of	r skills		
dicate previous work expe	rience that may be relevant to your applic	ation for an assistants	ship:
st any honors, distinctions	s, or awards you may have received:		
ate briefly your purpose fo	or applying for a graduate assistantship:		
eferences (List three individua	als able to comment on your ability and experienc	e)	
Name	Address	Job Title	Phone Number
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*If you indicated that you wish to be considered for an Experiential Learning Innovation (ELI) position, by signing this application you give your consent for the Office of Graduate Business Programs to share your resume with representatives from the ELI sponsor companies.

Date

Signature*