Application for Assistantship

Department of Statistics
Kansas State University

101 Dickens Hall
Manhattan, KS 66506-0802

1. Full Name: _______________________________________________________________
   Last   First   Middle

2. Indicate the type of assistantship you want to be considered for:
   - Teaching
   - Research
   - Both

3. TSE Score: __________ (foreign students only – attach copy)

4. Relevant academic/profession/personal honors:________________________________________
   ____________________________________________
   ____________________________________________
   ____________________________________________

Kansas State University in cooperation with other colleges and universities has approved the following resolution:

“In every case in which a graduate assistantship, scholarship, or fellowship for the next academic year is offered to an actual or prospective graduate student, the student, if he indicates his acceptance before April 15, will have complete freedom through April 15 to submit in writing a resignation of this appointment in order to accept another graduate assistantship, scholarship, or fellowship. However, an acceptance given or left in force after April 15 commits him not to accept another appointment without first obtaining formal release for the purpose.”

It is assumed that by your signature you agree to this policy.

_____ Date __________ Signature