

# **CAUTION:**

**THIS FORM WILL NOT WORK IF YOU HAVE OLD SOFTWARE.**

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**<http://www.adobe.com/products/acrobat/readstep2.html>**

# The Department of Classics



*Park Hall, University of Georgia  
Athens, Georgia 30602-6203  
Phone: 706-542-9264 Fax: 706-542-8503*

## APPLICATION FOR GRADUATE ASSISTANTSHIP

This form is used for making application for a graduate assistantship. Send this form to Graduate Coordinator, Dept. of Classics, Park Hall, University of Georgia, Athens GA 30602-6203. Applicants for graduate assistantships must be admitted by the Graduate School as prospective degree candidates by February 15th; therefore, all application materials must be submitted to the Office of Graduate Admissions as soon as possible but no later than January 1. Consult the Graduate School web site ([www.gradsch.uga.edu](http://www.gradsch.uga.edu)) for UGA application forms and general information.

Applicants will be notified of award decisions by April 15.

Assistantships are granted for a one-year period but may be renewed for a second year, contingent upon satisfactory academic progress, recommendation of the department, and re-submission of this form.

### PLEASE TYPE OR PRINT CLEARLY.

Social Security Number \_\_\_\_\_ Date of Birth \_\_\_\_\_ Application Date \_\_\_\_\_

Full Name \_\_\_\_\_

Address to which assistantship decision should be sent \_\_\_\_\_  
\_\_\_\_\_

Telephone number where you can be reached (between March 15 and April 15) \_\_\_\_\_

E-mail address: \_\_\_\_\_

I propose to work toward a Masters Degree in in Latin Classical Languages Greek (Circle One)

I have attended the following colleges or universities (list all post-secondary institutions attended):

Institution	Dates Inclusive	Degree Received	GPA
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

I am currently enrolled in The University of Georgia Graduate School: Yes \_\_\_\_ No \_\_\_\_

I expect to be admitted to Graduate School for \_\_\_\_\_ Semester, 20\_\_\_\_

Graduate Record Exam Scores: Verbal \_\_\_\_\_ Quantitative \_\_\_\_\_ Writing \_\_\_\_\_ Date taken (or expected) \_\_\_\_\_

Honors and other evidence of scholarship:

The following three persons have been requested to submit reference forms or to write letters of recommendation on my behalf and to send the forms or letter directly to the departmental graduate coordinator. (Letters of recommendation or reference forms should be written by persons qualified to give judgment on scholarly attainment and promise of the applicant.) It is the applicant's responsibility to see that these letters are received no later than January 1. Letters of recommendation are needed only for the initial application.

1. 

Name	Address	Phone
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2. 

Name	Address	Phone
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3. 

Name	Address	Phone
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