

MICHIGIAN STATE UNIVERSITY
COLLEGE OF NURSING

Application for Graduate Assistantship/Fellowship/Traineeship

Name _____

Address _____

Email _____

Telephone _____

PID _____

*****Please include a copy of your resume with the application.***

I. Program Information

Program _____ Concentration _____

Clinical Track _____ Date of Acceptance _____

Program Start Date _____ Anticipated Date of Completion _____

Current Grade Point Average _____ # of Credits Completed _____

Advisor _____

II. Enrollment Information

Anticipated Enrollment for the upcoming academic year (number of credits):

Fall: _____ Spring: _____

If enrolled part-time, would you consider full-time enrollment if full-time financial assistance (assistantship or fellowship) were available?

Yes _____ No _____ NA _____

List your plan (courses and credit hours) for full-time study during the assistantship/fellowship/traineeship year.

Fall

Spring

III. Preference for Graduate Assistantship Work Assignment

I prefer a Teaching Assistant Position _____

I prefer a Research Assistant Position _____

Either position is acceptable _____

Not applicable _____

IV. Personal Statement

Please describe your reason/s for applying for an assistantship, fellowship or traineeship and how this will assist you in completing your graduate education.

If applicable, how will the work experience associated with an assistantship assist you in meeting your academic and career goals? Please highlight your leadership goals.

V. Past Experience

Please list your past experience in teaching, research or the clinical setting.

Please highlight leadership experience.

Teaching

Research

Clinical Setting

I hereby attest to the accuracy of the information supplied on this application and authorize the MSU College of Nursing to release information concerning this application and/or an official transcript of my academic record to fellowship donors, their representatives and/or selection committees.

Signature of applicant

Date