

GEORGIA STATE UNIVERSITY
DEPARTMENT OF KINESIOLOGY AND HEALTH
APPLICATION FOR GRADUATE ASSISTANTSHIP
Master of Science in Exercise Science

Please type or print (neatly) all information

Date: _____

NAME: (Mr./Ms.) _____

BIRTHDATE: _____

BIRTH PLACE: _____

PERMANENT ADDRESS: _____

ADDRESS WHERE YOU WILL BE IN MAY: _____

CURRENT PHONE: () _____ MAY PHONE: () _____ EMAIL: _____

LIST ALL COLLEGES PREVIOUSLY ATTENDED *(please provide transcripts):*

INSTITUTION	LOCATION	FROM	TO	MAJOR	DEGREE

LIST PROFESSIONAL OR ANY OTHER WORK EXPERIENCE, MOST RECENT FIRST:

INSTITUTION OR ORGANIZATION	DATES	POSITION HELD

GRADUATE RECORD EXAM: (*QUALITATIVE* _____ *QUANTITATIVE* _____)

MILLER ANALOGIES TEST: _____ DATE TO TAKE GRE OR MAT *(if not already taken)*: _____

UNDERGRADUATE GRADE POINT AVG: _____

HONORS, AWARDS, & OTHER RECOGNITIONS *(include varsity athletics)*: _____

HOBBIES: _____

ARE YOU CERTIFIED IN CPR? _____ EXP DATE: _____

OTHER CERTIFICATIONS: _____

PLEASE CHECK ALL ITEMS WITH WHICH YOU HAVE EXPERIENCE:

_____ Aerobic Dance/Low Impact _____ Water Aerobics _____ Skin fold Calipers
_____ Hydrostatic Weighing _____ Blood Pressure _____ Sub-max bike/treadmill
_____ Other: _____

INTEREST AREA FOR ASSISTANTSHIP: check all that apply

***RESEARCH** _____ ***FITNESS CENTER** _____
responsibilities vary depending on project. Fitness testing, personal training, fit fairs, etc.

DATE ADMITTED TO GSU: _____, **OR DATE YOU PLAN TO APPLY TO GSU:** _____

DATE YOU PLAN TO BEGIN COURSEWORK AT GSU: _____

HOW DID YOU HEAR ABOUT OUR PROGRAM *flyer, professor, friend, other (specify) :*

PLEASE LIST THREE REFERENCES OF INDIVIDUALS WHO ARE FAMILIAR WITH YOUR WORK AND/OR QUALIFICATIONS:

NAME	POSITION	MAILING ADDRESS	TELEPHONE

BRIEFLY STATE WHY YOU ARE INTERESTED IN A GRADUATE ASSISTANT POSITION AT GEORGIA STATE UNIVERSITY: _____

***Make sure you include this application with your admission packet. If you are interested in a position with the Fitness Center, please FAX a copy of this application to Debbie Rupp at 404.413.1768.**

PLEASE CALL OR EMAIL DEBBIE RUPP IF YOU HAVE ANY QUESTIONS REGARDING POSITIONS IN THE FITNESS CENTER: (404) 413-1757 dbrupp@gsu.edu

PLEASE CALL DR. MARK GEIL IF YOU HAVE QUESTIONS REGARDING POSITIONS IN RESEARCH: 404.413.8050.