

Application for Graduate Assistantship

University of Minnesota Duluth Department of Music

Please complete and return this form to:

UMD Dept. of Music
 Graduate Program
 31 W. College Street
 Chester Park #206
 Duluth, MN 55812

Name: _____ Phone: (____) _____

Mailing Address: _____ e-mail: _____

Please list Education History (including high school)

Name of School	Date Graduated	Degree Earned

Please indicate your area of preference for a Graduate Assistantship (preference does NOT indicate your final assignment)

- | | | |
|---|--|--|
| <input type="checkbox"/> Bands | <input type="checkbox"/> Choirs | <input type="checkbox"/> Music Education |
| <input type="checkbox"/> Athletic Bands | <input type="checkbox"/> Opera | <input type="checkbox"/> Collaborative Piano |
| <input type="checkbox"/> Orchestra | <input type="checkbox"/> Music Theory | <input type="checkbox"/> Piano Instruction |
| | <input type="checkbox"/> Music History | |

Please provide background/experience you have in the areas you have selected and why you are interested in a G.A. in this/these area(s): _____

Are you applying for any other forms of financial aid? Yes _____ No _____

If so, please indicate what types and from what source (student loans, fellowships, T.A.s in other departments, etc.) _____
