

APPLICATION FOR MASTER'S LEVEL ASSISTANTSHIP

PLEASE PRINT CLEARLY

Student's Name: _____ ID Number: _____

Mailing Address: _____

Cell Phone Number: _____ Preferred E-mail Address: _____

Anticipated Graduation Date: _____ Program of Study: _____

Total Credits Completed: _____ Present CUM: _____

Are you able to commit to 6-8 hours of work per week during the regular work week (Monday-Friday)? Yes No

Are you able to commit to some evenings of work per week? Yes No

If yes, which evenings? _____

Do you anticipate any changes to your schedule over the next semester which would make the weekly commitment of 6-8 hours more difficult (e.g. student teaching, switch to evening work)? Yes No

If yes, please explain: _____

Master's Level Assistantships involve 6-8 hours of work per week (100 hours total each semester) in return for three credits of your tuition will reimbursed each semester. All Chestnut Hill College Assistants are expected to register for a minimum of 6 credits per semester and to maintain a cum of at least 3.75. Placements for Assistantships renew on a semester by semester basis. Final decisions are based on scholarship and the number of credits completed (preference given to students who have completed at least six master's level credits), with financial need as a secondary criterion.

This application is for (circle one): Fall Spring Summer

I have read the above written policy and understand that I **must reapply each semester**.

Student Signature

Date

REQUEST/APPROVAL
and

Note: A job description must be provided by the department requesting the assistantship prior to approval acceptance procedures. No exceptions.

Job Description Provided: Yes No

Signature of Assistantship Supervisor

Date

Signature of Assistant to the Dean, SGS

Date

Student Accounts Notified On: _____ (Please attach a copy of Student Accounts e-mail notification for file)

Copies to: Supervisor, SGS Office