Dr. Suzanne A. Snively Graduate Assistantships

Sac State Student ID: _______________________

Name: ____________________________________

Graduate Level: Classified ___   Unclassified ___

*Department Chair/or Designee Signature: ________________________  Date: ____________

Print name: _____________________________  Phone ext.: __________

Please indicate which criteria qualify you for this scholarship:

___  New Sacramento State Graduate/Teaching Assistant for Fall 2015
   (Must have a 3.0 overall Grade Point Average, as graduate)

___  Continuing Graduate student, first time applying for Graduate/Teaching Assistant program
   (Must have a 3.5 overall Grade Point Average)

___  Continuing Graduate/Teaching Assistant (must have a 3.5 Grade Point Average)

Supplemental Questions:

1. List or describe your academic achievements and goals.

2. List or describe your career goals

3. List or describe campus groups or organizations that you belong to.

4. List or describe any positions of leadership that you have had.

5. List or describe any community service that you participate in.

Complete application packet should include:

___  *Signature of Department Chair in his/her recommendation of the applicant for the scholarship

___  Graduate unofficial transcript(s)

___  Responses to Supplemental Questions

*Note: Your Fall 2015 unit load must be approved by the Department Chair in his/her recommendation of the applicant for the scholarship.