



MPA Graduate
Research
Assistantship
Application

Applicant Information

Full Name: _____ Date: _____
Last First M.I.

Address: _____
Street Address Apartment/Unit #

City State ZIP Code

Phone: () _____ E-mail Address: _____

Semester for which you are applying for a GRA: _____ Social Security Number: _____ Student ID Number: _____

Program of Study: MPA MPA/JD MPA/MPH

Career Track: _____

If you are in a graduate program outside UAB indicate the name of your program:

Are you a citizen of the United States? YES NO If no, are you authorized to work in the U.S.? YES NO

Relevant Experience

Please list research or teaching experience or related coursework (i.e. empirical or library research, coursework in statistics, or computer training):

<i>Institution or Organization</i>	<i>City</i>	<i>State</i>	<i>Dates</i>	<i>Describe Experience or Coursework</i>

Disclaimer and Signature

I certify that my answers are true and complete to the best of my knowledge.

If this application leads to my selection as a graduate research assistant, I understand that false or misleading information in my application may result in loss of the assistantship.

I hereby authorize the release of this information to third parties who have GRA openings. NOTE: Unless waived, all information obtained is protected under the Educational Rights and Privacy Act of 1974.

Signature: _____ Date: _____