STUDENT ENGAGEMENT AND LEADERSHIP (SEL)

APPLICATION FOR GRADUATE ASSISTANTSHIP (GA) POSITIONS IN 2022-2023

Use this form to apply for GAs* under Student Engagement: Student Activities and Involvement, Student Organization Resource Center, Fraternities and Sororities Program, Center for Student Business, Student Union Craft Center, Student Union Art Gallery, and Graduate Student Senate. Please submit your application, resume and cover letter by Thursday June 30rd, 2022

Email completed application form, resume, and cover letter(s) to gasearchse@umass.edu email any questions to Amy Helstowski amydh@umass.edu or you can reach her at 413-835-5825

List the Position title of the SEL graduate assistantship(s) you are applying for or being appointed to:

________________________________________________________

PERSONAL DATA

Legal Name: Last, First, Mi ____________________________________________________________

Campus/Student/SPIRE ID (required if admitted to UMass) ________________

Do you have a student visa? Yes _ No__
If Yes: you may work 20 hrs. Max when enrolled; 40 hrs. Intersession, summer

Local Address if available: #/Street, PO Box, City, State, Zip ________________________________

Phone (s) (required) _________________________________________________________________

Email (s) (required) _________________________________________________________________

Permanent Address if different #/Street PO Box City, State, Zip ________________________________

Have you worked at UMass before? Yes__ No__ Employee ID (optional): ______________________

Have you been appointed as a graduate assistant at UMass before? Yes__ No__
ACADEMIC PROGRAM  (Combined credit and work hours over 40 require GPD pre-approval. If a direct correlation between job duties and degree program is not apparent, a GPD memo will be required describing that)

Are you an incoming graduate student? Yes ___ No ___

College and Graduate Program Admitted to or Enrolled in:____________________________
Graduate Program Asst., Coordinator, or Secretary-Name/contact info:____________________________
Graduate Program Director (GPD) Name ____________________________
GPD Phone ____________________________
Credit Hrs____
Total hours/week you will work in other campus jobs________
Suggested Times Available to Work__________________________________________________

PROFESSIONAL REFERENCES (If not on your resume, list here)

1. Name ____________________________ Phone/email ____________________________
2. Name ____________________________ Phone/email ____________________________

Please answer the following; this information will be used ONLY if you are hired.

Do you have a Work Study Award?  Amount__________________________  None______

Do you, or, will you, work elsewhere on campus? Yes ___ No:__ (all pay is combined into one check.)