

## Please submit your application to the assistant to the chair, Brianna Patranella (brianna.patranella@shsu.edu) by 11/17/23

Department of Psychology & Philosophy Non-teaching Graduate Assistant Application			
Name:		Date:	
Graduate Program:Clinical	Masters	Experimental	School Psychology
Are you a returning GA? Yes No If yes, who is your prior supervisor			
Name of faculty member you are wanting to work with (if known)?			
What is your class schedule for the	e upcoming	semester? What days a	and times are you available?
Depending on department funding, would you request either a 10 hour or a 20 hour assistantship? (Please check one)			
Some courses require you to attend all the class meetings, please check the "I Agree" box to acknowledge that you may be asked to do this as part of your job. I Agree			
Are you working in another department or university setting? If so, where and what are your responsibilities? How many hours do you work?			

What courses do you feel prepared to assist the instructor? What experiences do you have relevant to this course work?

Are you an international student? Yes\_\_\_\_ No\_\_\_\_

**\*\***Please note, GA positions are not guaranteed, and students are not guaranteed the hours requested.

With your signature, you confirm this information is accurate and honest to the best of your knowledge.

Signature:

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