

Financial Award Application

Mr.			
Ms.			ID #:
(Last or Family Name)	(First)	(Middle)	(Optional)
Proposed Field of Study:			Expected Entry Semester:
Mailing Address:			Permanent Address:
Home Telephone #:			Work Telephone #:
Single Married # o	f Children:		Other Dependents:

Please select all types of Financial Awards you are applying for:

	Graduate Teaching	g Assistantship ((GTA)	Tuition Waiver	Graduate Research	Assistantship	(GRA)
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Please answer the following questions:

1. What three disciplines do you feel most qualified to teach? (i.e., Chemistry, Physics, etc.)

Discipline	Highest Course Completed
(i.e., Chemistry, Physics, etc.)	(i.e., Chemistry 305)

2.	Will you or do you expect to receive financial assistance from any source during the academic year (this			
	includes parents, self, spouse, or relatives)?	🗌 No	🗌 Yes	
	If Yes, please indicate amount and source:			
3.	Do you or your spouse expect to be employed in any capacity during the academic year?	🗌 No	🗌 Yes	
	If Yes, please give details:			
4.	Will you be under the financial sponsorship of any individual or organization?	🗌 No	🗌 Yes	
lf Y	es, please give details:			

I hereby certify that to the best of my knowledge the foregoing information is true and complete without evasion or misrepresentation. I understand that if it is later found otherwise, it is sufficient cause for rejection or dismissal from Montana Tech.

Signature: