

COLLEGE OF HUMAN SCIENCES

DEPARTMENT OF DESIGN



APPLICATION FOR TEACHING AND RESEARCH ASSISTANTSHIPS DEPARTMENT OF DESIGN

FULL NAME: _____ SOCIAL SECURITY NUMBER: _____

ADDRESS: _____ TELEPHONE () _____

EMAIL ADDRESS: _____

PROPOSED DEGREE AT TEXAS TECH UNIVERSITY

MAJOR FIELD OF INTEREST _____

PROPOSED DATE OF ENROLLMENT _____

ACADEMIC PREPARATION: COLLEGES AND UNIVERSITIES ATTENDED--UP TO AND INCLUDING THE ONE CONFERRING YOUR HIGHEST DEGREE.

INSTITUTION	DATES	MAJOR	DATE DEGREE CONFERRED

SCHOOL AND COLLEGE TEACHING EXPERIENCE

INSTITUTION	TITLE	SUBJECTS TAUGHT	DATES

PROFESSIONAL EXPERIENCE OTHER THAN TEACHING: INCLUDE ANY PERTINENT EXPERIENCE IN BUSINESS, INDUSTRY, AND ACADEMIC RESEARCH.

HONORS AND AWARDS

PROFESSIONAL ORGANIZATIONS: PLEASE INDICATE THE TYPE OF PARTICIPATION.

PUBLICATIONS: PLEASE PROVIDE FULL BIBLIOGRAPHICAL DATA.

REFERENCES: (NAME, TITLE, ADDRESS, AND TELEPHONE NUMBER OF THREE PERSONS.)

- 1.
- 2.
- 3.

PHILOSOPHY STATEMENT: PLEASE ATTACH A STATEMENT OF PHILOSOPHY REGARDING YOUR PURSUIT OF GRADUATE STUDY.

PLEASE SUBMIT CURRENT COPY OF RESUME WITH YOUR APPLICATION

I AM REQUESTING TRANSCRIPTS OF ALL MY PREVIOUS WORK AS WELL AS MY GRADUATE RECORD EXAMINATION (GRE) SCORE, TEST OF ENGLISH AS A FOREIGN LANGUAGE (TOEFL) IF REQUIRED, OR GRADUATE MANAGEMENT ADMISSION TEST (GMAT) IF TAKEN, TO BE SENT TO THE DEPARTMENT OF DESIGN DEPARTMENT, TEXAS TECH UNIVERSITY, AS PART OF THIS APPLICATION. IF MY APPLICATION IS SUCCESSFUL, I AGREE TO ACCEPT OR DECLINE THE APPOINTMENT WITHIN TWO WEEKS AFTER MY RECEIPT OF THE NOTIFICATION. I FURTHER AGREE NOT TO ACCEPT ANOTHER APPOINTMENT WITHOUT AN OFFICIAL RELEASE FROM TEXAS TECH UNIVERSITY.

DATE _____ SIGNATURE _____

RETURN TO:

**TEXAS TECH UNIVERSITY
COLLEGE OF HUMAN SCIENCES
DIRECTOR OF GRADUATE PROGRAMS
DEPARTMENT OF DESIGN Box 41162
LUBBOCK, TX 79409-1162**