## T,

## LOUISIANA TECH UNIVERSITY Office of Financial Aid

Please return this completed form to: Louisiana Tech University Office of Financial Aid PO Box 7925 Ruston, LA 71272 techaid@latech.edu

## **Graduate Assistantship Information 2021-2022**

Please complete the following form in order to the Office of Financial Aid to determine whether or not to include the Department Graduate Assistantship(s) on applicable students. At this time, we do not need a listing of students who are receiving the Graduate Assistantships. Please complete a form for each category of Departmental Assistantship that you award.

Name of College:						
Name of Department:						
Graduate Assistantship Type:			Approx. Numb	Approx. Number of this type of Assistantship		
Length of Appointment:						
Applicable Quarters:	Fall	Winter	Spring	Summer		
Total Value of the Assistantshi	p for Length of Appoin	tment:				
Funding for Assistantship com	es from:					
Is Reinstatement possible if st	udent loses the Assist	antship?				
<b>Eligibility Criteria</b>	(check all t	hat apply):				
Completed Application for Assistantship						
Meet Graduate S	chool Admissio	n Requirement				
Meet the Requirements of the College						
Order in which the assistantship application was received						
Competitive Basis	S					
Grade Point Aver	age					
Test Scores						
Skills Offered by	the Applicant					
Needs of the Coll	ege / Departme	ent				
Work Required						
Student's financial 'need' is a factor in decision (student's income, finances, or financial aid were considered)						
Enrollment Status	s (choose one):					