

**Department of Mathematics
Washington State University
Graduate Awards Application**

Name _____ Date _____

WSU ID Number _____ Your current advisor _____

Your Local Phone _____ Your WSU Email _____

Local Address _____

City _____ State _____ Zip _____

Permanent Phone _____ Personal Email _____

Permanent Address _____

City _____ State _____ Zip _____

Graduate Program: _____ Expected Degree _____ MS _____ PhD

Intended Graduation Date: Month _____ Year _____

Cumulative WSU GPA _____ Latest Semester GPA _____

List the semester(s) and year(s) for which you have served as a teaching assistant:

____ _ ____ _ ____ _ ____ _ ____ _ ____ _
____ _ ____ _ ____ _ ____ _ ____ _ ____ _

Are you a citizen of the United States? _____ Yes _____ No

If not a citizen, as you a permanent resident? _____ Yes _____ No

Optional:

Gender: _____ male _____ female

Ethnic Origin: _____ Asian/Pacific Islander _____ Chicano/Latino/Hispanic _____ Caucasian

_____ African American _____ Native American or Alaskan Native

I authorize the Awards Committee to hold a copy of my transcript and other records and to release my GPA and personal information to scholarship donors.

Signature of Applicant

Date

**Complete this form and turn it in to
Department of Mathematics Main Office
Neill Hall - Rm 107
NO LATER than February 27, 2009
Please attach your curriculum vitae.**