Application for Graduate Teaching Assistantship  
University of Minnesota Duluth Department of Music

Please fill out and return this form to:

UMD Department of Music  
Graduate Program  
31 W. College Street  
206 Chester Park Bldg  
Duluth, MN 55812

Name: ___________________________ Phone: _(____)_________________
Mailing Address: __________________e-mail: ______________@__________

Please list Education History (including High School)

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<th>Name of School</th>
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Please indicate your area of preference for Teaching Assistantship (preference does NOT indicate your final assignment)

☐ Bands   ☐ Athletic Bands   ☐ Orchestra  
☐ Choirs   ☐ Opera   ☐ Music History  
☐ Piano (accompanying)   ☐ Piano (instruction)

Please provide background/experience you have in the areas you have selected and why you are interested in a T.A. in this/these area(s):

________________________________________________________________________
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________

Are you applying for any other forms of financial aid? Yes____ No_____  
If so, please indicate what types and from what source (student loans, fellowships, T.A.s in other departments, etc.) ____________________________

Application for T.A. updated: 2015