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>
<th>Date Graduated</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)
☐ Music Theory

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: 2017