

MARQUETTE UNIVERSITY GRADUATE SCHOOL

GRADUATE ASSISTANTSHIP / FELLOWSHIP REGISTRATION FORM

This form is to be used to request authorization and receive a permission number for the course indicated in Section II. Graduate fellows / assistants who are full-time without this course do not need to complete this form or register for these courses. Registration for these courses is restricted to students with graduate assistantships or fellowships. After receiving the permission number, the student must register via CheckMarq for Fellowship (874), Graduate Assistant Teaching (875), or Graduate Assistant Research (876). Registration for one of these courses in combination with 6 credits of course work will result in the student being considered full-time. These courses are zero-credit courses. A course fee will be charged.

I. Student Information

Name: _____		MUID: _____	
Department: _____		Degree: _____	
Citizenship status: <input type="checkbox"/> U.S. citizen		<input type="checkbox"/> Perm. Res.	<input type="checkbox"/> Visa status: _____
Registration is requested for:		(check term and year boxes)	
Fall	Spring	Summer	
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
		2007	2008
		<input type="checkbox"/>	<input type="checkbox"/>
		2009	2010
		<input type="checkbox"/>	<input type="checkbox"/>
Student Signature: _____		Date: _____	

II. Request for Graduate Fellowship / Assistantship Teaching / Graduate Assistantship Research

For the term indicated above, I have received a:	<input type="checkbox"/> Fellowship 874	<input type="checkbox"/> TA 875	<input type="checkbox"/> RA 876
I will be taking the following courses:			
Department	Course Number	Credit Hours	
_____	_____	_____	
_____	_____	_____	
_____	_____	_____	
It is expected that recipients of graduate fellowships and assistantships will be taking 6 credits of actual course work in addition to this 874, 875, or 876 course. If you are not taking 6 credits of course work, registration for this course requires the approval of the department and the Dean of the Graduate School. Please indicate the reason for this exception:			
<input type="checkbox"/> I need less than 6 credits to graduate			
<input type="checkbox"/> The appropriate courses are not offered this term			
<input type="checkbox"/> Other: _____			
Approvals:			
_____		_____	
Adviser Signature		Date	
_____		_____	_____
Dept. Chair/Director of Graduate Studies Signature		Date	Section Number
_____		_____	_____
Dean of the Graduate School Signature		Date	
_____		_____	