

Request for Graduate Research Associate Membership
Office of Graduate and Continuing Studies
PITTSBURG STATE UNIVERSITY

The Graduate Faculty of the Department/School of _____
recommends that _____ be appointed for Graduate
Research Associate Membership.

Applicant holds the following degrees:

DEGREE	MAJOR	MINOR	INSTITUTION	DATE RECEIVED

Terminal degree as listed in the Unclassified Handbook section 2.1.3? Yes No

State the professional, research, or work experiences which would bear upon the person's
qualifications as a Graduate Research Associate:

Departmental Chairperson

Date

Dean of College

Date

Graduate Council Chairperson

Date

PLEASE ATTACH VITA