



PLANT SCIENCES DEPARTMENT
THE UNIVERSITY OF TENNESSEE, KNOXVILLE
BACKGROUND AND GRADUATE ASSISTANTSHIP APPLICATION FORM

Please print or type requested information.

Date: _____.

I will or have applied for admission to the _____ M.S. _____ Ph.D. program in the Plant Sciences Department and plan to enter _____ Semester _____ Year.

I wish to apply for an assistantship: YES _____ NO _____.

Name: _____
 _____ Last First Middle

Social Security #: _____ **Race** _____ **Sex** _____

Inquiries as to race and sex of the applicant are made solely for affirmative action purposes. Neither race nor sex shall be used as a factor in the selection of graduate assistants.

Present Address: _____
 _____ (Number) (Street)
 _____ (City) (State) (Zip Code)

Telephone: _____ **Email:** _____

<u>Colleges & Universities Attended</u>	<u>Dates</u>	<u>Degree</u>	<u>Major</u>
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

Academic Record:

Grade Point Ave.: B.S. _____ M.S. _____

GRE (if available): _____ / _____ / _____ (Verbal/Quant./Analy.).

(Please attach or send a copy of *transcripts* of all college work.)

Please Provide a Brief Personal History:

Please Indicate Your Area of Research Interest(s) and Reason(s) for Your Choice:

Please indicate your career goals:

References: Give the names and addresses of three persons acquainted with your academic work and/or with you as an employee. Letters of recommendation should be requested by you and sent by the writer to the address shown below:

<u>Name</u>	<u>Address</u>	<u>Telephone #</u>
_____	_____	_____
_____	_____	_____
_____	_____	_____

The Public Acts of 1969, Chapter 130, State of Tennessee, require that the following information be obtained from each applicant for employment:

Have you ever been convicted for the violation of a criminal law? Yes ____ No ____
 Have you ever been dismissed from employment for any reason? Yes ____ No ____

If either is Yes, please attach full and appropriate details.

The Institute of Agriculture does not discriminate on the basis of race, sex, color, religion, national origin, age, handicap, or veteran status in employment opportunities. Inquiries and charges of violation concerning Title VI, Title IX, Section 504, ADA or the Age Discrimination in Employment Act (ADEA) or any of the other above referenced policies should be directed to the Office of Equity and Diversity (OED), 1840 Melrose Avenue, Knoxville, TN 37996-3560, telephone (865) 974-2498 (V/TTY available) or 974-2440. Requests for accommodation of a disability should be directed to the ADA Coordinator at the UTK Office of Human Resources, 600 Henley Street, Knoxville, TN 37996-4125.

All statements made in the application are true, complete, and correct. I understand that any misrepresentation or omission of information shall be considered sufficient reason for withdrawal of an offer or subsequent dismissal if employed.

SIGNATURE: _____ **DATE:** _____

Please return this application to: **Graduate Admission Chair
 Plant Sciences Department
 The University of Tennessee
 Knoxville, TN 37996-4561
 FAX (865) 974-1947**