

APPLICATION FOR ACADEMIC ACHIEVEMENT AWARD  
Office of Graduate Studies and Research

**For Academic Year 2009-2010**

**Academic Achievement Awards** are special graduate assistantships that are available on a competitive basis to graduate students with outstanding academic records. Recipients of the AAA are automatically awarded a full-time assistantship with an additional stipend. The stipends are combined and paid in approximately twenty bi-weekly payments. Work requirements are the same as for regular assistantships (20 hours per week). Recipients must enroll in a minimum of 6 hours of graduate coursework.

Minimum requirements are a baccalaureate degree and a minimum undergraduate grade point average of 3.0 (4.0 system). Applicants must also have at least one full year of graduate work remaining to be completed and eligible for a graduate assistantship for the fall **and** spring semesters. **No student who has been previously awarded an Academic Achievement Award is eligible for nomination.**

Awards will be made by May 8, 2009. **Application and supporting material deadline is April 6, 2009.**

\*Complete applications for these awards will include the following:

This form with the bottom half completed

An application for admission to graduate school\*\*(see note below)

Official transcripts of undergraduate work\*\*(see note below)

**A typed statement not to exceed one page on specific research interests and/or career goals.**

Three letters of recommendation on the forms attached (recommendations already on file in the Graduate Office can be used for this requirement)

Any supplemental information you wish to include, such as test scores (GRE, GMAT, Millers' Analogy or others)

**\*Incomplete applications will not be considered by the award committee. It is the student's responsibility to make sure all required materials are submitted to the Graduate Office.**

**\*\*These two requirements are necessary for new students applying for graduate admission. Applications for admission and official transcripts already on file with the Graduate Office will be used for these requirements.**

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Name \_\_\_\_\_ Student ID Number \_\_\_\_\_

Address \_\_\_\_\_ Telephone \_\_\_\_\_

ESU email address \_\_\_\_\_

Undergraduate college(s) attended \_\_\_\_\_

Undergraduate major \_\_\_\_\_ Date undergraduate degree completed \_\_\_\_\_

Overall grade point average, undergraduate \_\_\_\_\_ graduate\*\* \_\_\_\_\_

ESU major \_\_\_\_\_ Date of admission to graduate program \_\_\_\_\_

Print or type below the names and addresses of each reference:

1. Name \_\_\_\_\_

Address \_\_\_\_\_

2. Name \_\_\_\_\_

Address \_\_\_\_\_

3. Name \_\_\_\_\_

Address \_\_\_\_\_

\*\*if applicable

Return completed form to:

**Office of Graduate Studies and Research  
Campus Box 4003  
Emporia State University  
Emporia, KS 66801-5087**

**I. To be completed by applicant (please print or type):**Name of applicant: \_\_\_\_\_  
Last First Middle Student IDApplying for:  Academic Achievement Award

Department/School: \_\_\_\_\_

I agree that the recommendation I am requesting shall be held in confidence by officials of Emporia State University, and I hereby waive any rights I may have to examine it.  Yes  No

Applicant's signature: \_\_\_\_\_ Date: \_\_\_\_\_

**II. To be completed by the recommender:**

(A letter of reference on institutional letterhead may be submitted in lieu of this form). Please indicate how long and in what capacity you have known the applicant. We would appreciate your evaluation of the applicant's past work and overall potential for doing graduate work and/or performing as a teaching or research assistant. The checklist below may be useful in suggesting areas on which to comment. (Use reverse or second sheet if necessary.)

Please rate the applicant according to the following scale:

5 = outstanding, 4 = excellent, 3 = very good, 2 = good, 1 = fair, 0 = poor, N = no basis for judgment

\_\_\_ Intellectual capability    \_\_\_ Ability to express thoughts in writing    \_\_\_ Teaching ability (if known)    \_\_\_ Motivation  
\_\_\_ Research skill    \_\_\_ Ability to express thoughts orally    \_\_\_ Maturity    \_\_\_ Overall abilityRecommender's name \_\_\_\_\_ Position or title \_\_\_\_\_  
(please print or type)

Signature \_\_\_\_\_ Date \_\_\_\_\_

Address \_\_\_\_\_

Telephone \_\_\_\_\_

Please return this form directly to **Graduate Studies, Box 4003, Emporia State University, 1200 Commercial, Emporia, KS 66801-5087**

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(please print or type)

Signature \_\_\_\_\_ Date \_\_\_\_\_

Address \_\_\_\_\_

\_\_\_\_\_  
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Signature \_\_\_\_\_ Date \_\_\_\_\_

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