

GRADUATE ASSISTANT APPLICATION FORM
ADELPHI UNIVERSITY
DEPARTMENT OF HEALTH AND SPORT SCIENCES

Master's of Science Program in Exercise Science

Name: _____ Date: _____

Age: _____ Height: _____ Body Mass: _____

Street Address: _____

Email Address: _____

Telephone: _____ Cell phone: _____

Date of Birth: _____

Academic Rating: GPA overall _____ GPA major _____ Major _____

Education:

<u>School</u>	<u>Location</u>	<u>Dates</u>	<u>Major</u>	<u>Degree</u>
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_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

Honors and Organizations:

Work Experience:

<u>Position</u>	<u>School or Company</u>	<u>Dates</u>
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_____	_____	_____
_____	_____	_____
_____	_____	_____

Work Experience: (CONTINUED)

Position School or Company Dates

References:

Name School or Company Position Contact phone

Your purpose for entering graduate study:

Additional Experience for consideration of a graduate assistantship award:

Department of Health and Sport Sciences

ACTIVITY COMPETENCY LIST

Please indicate your estimated teaching ability or experience by number and/or description in Column 1: Excellent (1), Good (2), Average (3), Fair (4), Poor (5). In column 2, make any comments in regard to specific experience or ability.

	<u>Ability</u>	<u>Comments</u>
Aerobic Dance	_____	_____
Aquatics	_____	_____
Conditioning	_____	_____
Kick Boxing	_____	_____
Personal Training	_____	_____
Group Exercise	_____	_____
Strength Training	_____	_____
Sports Conditioning	_____	_____
Yoga	_____	_____
Body Composition	_____	_____
ECG Interpretation	_____	_____
Metabolic Testing	_____	_____
Cardiac Rehab	_____	_____
Pulmonary Rehab	_____	_____
Other:	_____	_____
	_____	_____

Please return to: Robert M. Otto, Ph.D. or John Wygand, M.A.
Human Performance Lab, Woodruff Hall
Adelphi University
Garden City, NY 11530
otto@adelphi.edu or wygand@adelphi.edu