



GRADUATE STUDIES

College of Education

Graduate Scholarship and/or Graduate Assistantship Application

Name: _____ Date: _____

Lander ID #: _____ Email: _____

Street Address: _____ City: _____

Zip: _____ Phone: _____ Cumulative GPA: _____ Requested Amount: _____

Semester for which the scholarship is being requested Fall ___ Spring ___ Summer ___ Year ___

List all other tuition aid sources including amounts for each (example: employer reimbursement, G.I. benefits, etc.)

Degree Program (check/complete one)

M.Ed. Montessori

Preschool (Ages 3-6)

Primary (Grades 1-3)

M.Ed. Teaching and Learning

Diverse Learners

Exercise and Sports Studies

Instructional Technology

Signature of supporting faculty member: _____

Instructions:

1. Complete application accurately and completely.
2. **ATTACH A COPY OF YOUR MOST CURRENT TRANSCRIPT.**
3. Please provide a brief letter of rationale explaining any special circumstances or needs.
4. Submit completed application to: Martine Fezler in LC236 or scan/email to: mfezler@lander.edu
Fax # (864) 388-8111 or mail to: ATTN: Martine Fezler, Program Assistant - Lander University –
320 Stanley Avenue – CPO 6011 - Greenwood, SC 29649

Application Deadlines:

For Summer and/or Fall Semesters – **April 1st**. For Spring Semester – **November 1st**.

Please complete the information on this page if applying for a **Graduate Assistantship** in M.Ed. in Teaching and Learning or M.Ed. in Montessori. Graduate assistantships may involve a variety of supportive services including, but not limited to, assistance with teaching, research/scholarship, or service and may be available to scholarship recipients.

Name: _____ L# _____

Please complete the information below if also applying for a Graduate Assistantship in M.Ed. in Teaching and Learning or Montessori Education.

1. Degree Program (check/complete one)
 - M.Ed. Montessori
 - Preschool (Ages 3-6) Primary (Grades 1-3)
 - M.Ed. Teaching and Learning
 - Diverse Learners Exercise and Sports Studies Instructional Technology
2. Semester for which the assistantship is being requested Fall ____ Spring ____ Year ____
3. List the level and extent of any prior teaching experience. Attach additional sheet if needed.

Describe the specific skills/experiences which you believe would enable you to perform the duties of a graduate assistant. (e.g. Using iPad for instructional purposes or extensive experience in data analysis, etc.) Attach additional sheet if needed.

4. Provide contact information for two people to support your application for assistantship.

Name	Email	Address, and Telephone Number