

# Graduate Support Application

Jackson School of Geosciences  
The University of Texas at Austin

Name \_\_\_\_\_

EID \_\_\_\_\_

This application notifies the Graduate Student Support Committee of your intentions for support for a particular semester. If you indicate you are not seeking support for a particular semester you will not be considered for an assistantship for that semester. You would still be eligible for other support such as professional development, off-campus research, etc., subject to the rules of those awards.

Please fill out this form in its entirety. **All students must complete the schedule portion of this form** indicating your course and time obligations for the upcoming semester.

For the  FALL  SPRING (check one) semester of \_\_\_\_\_ (year):

**You must check one of the following six choices.**

1.  I request an appointment as a TA. Please indicate the subjects that you prefer and feel qualified to teach: \_\_\_\_\_
2.  I will have a RA appointment under the supervision of Dr. \_\_\_\_\_  
Account number and/or name: \_\_\_\_\_  
Signature of RA supervisor (**required**): \_\_\_\_\_
3.  I have served as a TA twice and would like to receive my Independent Studies semester.
4.  I anticipate or have received a fellowship.  
Name of fellowship: \_\_\_\_\_
5.  I will be supported outside of the Jackson School and am not requesting support.
6.  I hope to be appointed as a RA but do not have a source yet. (If you choose this option, please indicate in item #1 which subjects you prefer to TA in the event you are not a RA.)

## *FUTURE PLANNING:*

For the next two semesters *after* the one indicated above, please indicate your expected methods of support. You will not be held to these choices, but it will help the department plan for the future.

The following semester: \_\_\_\_\_ The semester after that: \_\_\_\_\_

## *ACKNOWLEDGMENT OF SUPPORT PLAN:*

My supervisor and I have agreed on this plan of support for the semester(s) indicated.

\_\_\_\_\_  
Student signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Supervisor signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Supervisor's printed name

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Jackson School of Geosciences

Name .....

EID .....

Course	Unique	Title	Lect/Lab Time	Instructor

	Monday	Tuesday	Wednesday	Thursday	Friday
<b>8:00</b>					
<b>9:00</b>					
<b>10:00</b>					
<b>11:00</b>					
<b>12:00</b>					
<b>13:00</b>					
<b>14:00</b>					
<b>15:00</b>					
<b>16:00</b>					
<b>17:00</b>					
<b>18:00</b>					
<b>19:00</b>					
<b>20:00</b>					

TA assignments are based on the schedule that you provide to us. Please make sure you fill it out accurately. If you make any changes to your schedule, please let the graduate coordinator know immediately!