Position Opportunities

The Department of Learning and Instruction offers 11 graduate assistantship positions each year.

Eligibility
Candidates must be admitted as full-time matriculating students in an advanced degree program in the Graduate School of Education. Preference will be given to students in LAI programs. Other criteria for selection will be determined by the nature of the particular position. For example, most positions require research work so preference is given to doctoral students.

Duties
Graduate assistants are expected to be available during the normal academic year. Positions require approximately 20 hours of work per week.

Stipends
Graduate Assistants receive stipends of approximately $9,000, and usually also receive a tuition scholarship.

Deadline
Preference will be given to students who apply by March 1. Those applying after March 1 will be considered only if vacancies have not been filled.

Application
Please contact the department of Learning and Instruction at 716-645-2455 or mcw22@buffalo.edu with any questions regarding the application.
Graduate Assistantship Application

Instructions: If you are a new student in the Department of Learning and Instruction, please check here (___) and complete the required information below. We will refer to letters of recommendation in your admission file. If you did not provide recommendation letters at the time of application for admission, send the attached recommendation forms to two recommenders of your choice.

If you are a current student in the Department of Learning and Instruction, please (1) complete this application and submit it to the department, (2) write the name of your faculty advisor here ________________________, and (3) send the attached recommendation forms to two faculty of your choice.

Name__________________________________________

Last                                                  First                                                  Middle

Person Number________________________________________

Current
Address__________________________________________

Street                                                  City                                                  State                                                  Zip code

Telephone Number____________________________________  E-mail Address____________________________________

Permanent
Address__________________________________________

Street                                                  City                                                  State                                                  Zip code

Telephone Number____________________________________  E-mail Address____________________________________

Degree Level(circle one): Ph.D.  Ed.D.  Ed.M
Program__________________________________________

Educational History:

<table>
<thead>
<tr>
<th>Name of Institution</th>
<th>Location of Institution</th>
<th>Dates of Attendance From To</th>
<th>Degree and Conferral Date</th>
<th>Program Area</th>
<th># of Graduate hours completed</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
Recommendations
Please list the names, titles and addresses of the recommenders; the name of your faculty advisor if you are currently enrolled student; and the names of the other UB faculty whom you feel know you.

Personal Statement
Please write a brief statement describing your educational and occupational goals. Include any information that you think is important in support of your assistantship application (attach a supplementary sheet if necessary), including research and technology skills.

Signature of Applicant__________________________________________________
Date______________________
Graduate Assistantship Information – Recommendation Form

Note to Applicant: Please complete this section.

Name___________________________________________________
Person Number__________________________________________

Degree Level (circle one) Ph.D Ed.D. Ed.M. Program______________________________

Waiver of Right of Access to Confidential Statement

I have asked ___________________________________________ to write a letter of recommendation for me in support of my graduate assistantship application. I hereby waive my right to inspect the recommendation and attachments of continuation. I understand I may not be required by the institution to waive that right as a condition for employment.

Signature of Applicant__________________________________ Date__________________________

If the applicant does not sign the statement, the law specifically reserves him/her the right of access to the letter in question.

Note to Recommender: Please indicate how long and in what capacity you have known the applicant. You may attach a supplementary sheet if necessary. Please return this form to the Department of Learning and Instruction, Graduate School of Education, University at Buffalo, 505 Baldy Hall, Buffalo, NY 14260-1000.

Recommender______________________________________________
(Signature) (Typed/Printed Name) (Title)

Address__________________________________________________
(Street) (City) (State) (Zip Code)

Telephone Number______________________________________ E-Mail Address______________________________