DEPARTMENT OF ART AND ART HISTORY M.F.A. ASSISTANTSHIP APPLICATION

This form is to be completed and returned directly to the Department of Art and Art History, PO Box 248106, Coral Gables, FL 33146-2618

TO BE CONSIDERED FOR AN ASSISTANTSHIP YOU MUST BE FULLY ADMITTED TO DEGREE SEEKING STATUS.

1.	Name:	Mr. Ms.			
2.	Address:	Last	First	M.I.	
۷.	Address.	Street / No.		City	
2	Application for	State		Zip	
3.	Application for	Year			
4.	specific as to am	er source (saving, spouse's en nount	50111111B3, BOVETTITIETTE 3F2-	113013111µ, C.C., W , C	receive and
wor		Assistantship does not pre tion contact the Office of Fi 305) 284-5212.			
wor Flor	rk-study informat rida 33124-520 (3	tion contact the Office of Fi			
wor Flor The	rk-study informat rida 33124-520 (3	tion contact the Office of Fi 305) 284-5212.			
wor Flor The	rk-study informat rida 33124-520 (3 e above information	tion contact the Office of Fi 305) 284-5212.			
wor Flor The Sigr	rk-study informat rida 33124-520 (3 e above information	tion contact the Office of Fi 305) 284-5212. on is true and correct:		s, University of Miami,	
wor Flor The Sigr	rk-study informat rida 33124-520 (3 e above information nature	tion contact the Office of Fi 305) 284-5212. on is true and correct:	nancial Assistance Service	s, University of Miami,	Coral Gab
wor Flor The Sigr	rk-study informat rida 33124-520 (3 e above information nature	tion contact the Office of Fi 305) 284-5212. on is true and correct: THE DEADLINE FOR	nancial Assistance Service	s, University of Miami,	Coral Gab