

# Iowa State University

## Department of Kinesiology

### Application for Graduate Assistantship

Iowa State University requests this information for the purpose of selecting graduate assistants. No persons outside the university are routinely provided this information.

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Name:

Current  
Address:

Permanent  
Address:

Email  
Address:

Please indicate your primary area of interest for graduate study by rank ordering the specific areas listed in the table below. Rank the area you have the **most interest** in studying as number **1** and rank the area you have the **least interest** in studying as number **6**.

	1	2	3	4	5	6
Biomechanics						
Exercise Physiology						
Exercise Psychology						
Motor Control						
Pedagogy						
Physical Activity & Health Promotion						

Indicate the type of Graduate Assistantship requested (Check all that apply)

Teaching Assistantship

Research Assistantship

Exercise Clinic Assistant

Recreational Services Assistant

Do you have any experience working or studying in a Physical Fitness & Conditioning Laboratory Setting?

Please explain any experience you have had in a Physical Fitness & Conditioning Laboratory Setting.

Please select from the list below, all activities that you feel **QUALIFIED** to teach. **NOTE:** Qualified indicates you can perform this activity well but have never taught it.

Badminton	Bowling
Racquetball	Tennis
Golf	Soccer
Volleyball	Physical Fitness & Conditioning
Running for Fitness	Walking for Fitness
Weight Training	First Aid & Emergency Care
Personal and Consumer Health	Aquatic Fitness
Swimming	

Please describe why you feel **QUALIFIED** to teach the topics selected above.

Please select all activities that you feel **HIGHLY QUALIFIED** to teach. (**NOTE:** Highly qualified indicates extensive experience performing AND teaching this activity.)

Badminton	Bowling
Racquetball	Tennis
Golf	Soccer
Volleyball	Physical Fitness & Conditioning
Running for Fitness	Walking for Fitness
Weight Training	First Aid & Emergency Care
Personal and Consumer Health	Aquatic Fitness
Swimming	

Please describe why you feel **HIGHLY QUALIFIED** to teach the topics selected above.

Please indicate any current certifications you possess (check all that apply)

CPR Certification

First Aid & Bloodborne Pathogen/Universal Precautions Training

CPR/AED/First Aid Instructor Certification

Lifeguard Training/Certification

Other

Please select **five** topics below that you would be most interested in teaching. **NOTE:** Selecting a topic here **DOES NOT guarantee** you will be selected to teach that topic.

Badminton

Bowling

Racquetball

Tennis

Golf

Soccer

Volleyball

Physical Fitness & Conditioning

Running for Fitness

Walking for Fitness

Weight Training

First Aid & Emergency Care

Personal and Consumer Health

Aquatic Fitness

Swimming

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Do you have experience working with youth programs?

Have you worked with elementary age children or adolescent populations? (check all that apply)

Elementary Age Kids

Adolescent Populations

If you checked either box with regard to your experience working with youth, please provide a brief explanation of your involvement working with youth programs and elementary or adolescent age populations.