APPLICATION FOR TEACHING ASSISTANTSHIP

_____________ Term 200__

This form should be used by all graduate students who wish to be considered for a teaching assistantship in the forthcoming term.

Name: ___________________________ Degree & year: ______________________
(in the semester of the TAship)

Address: ___________________________ Phone (#1): ______________________

____________________________ Phone (#2): ______________________

____________________________ Phone (#3): ______________________

____________________________ E-Mail: __________________________

Courses applied for (in order of preference):

1) ______________________________________________________________________

2) ______________________________________________________________________

3) ______________________________________________________________________

Please note that you may be offered a TAship for a course you have not applied for.

Graduate Courses taken (list all course numbers & grades):

________________________________________________________________________

________________________________________________________________________

________________________________________________________________________

________________________________________________________________________

________________________________________________________________________
Previous Teaching Assistantships held (list all courses and years):

___________________________________________________________________________

___________________________________________________________________________

___________________________________________________________________________

___________________________________________________________________________

___________________________________________________________________________

Signature: _____________________________ Date: ________________________________

For Office Use:

Course assigned to TA: _______________________________________________________
Hours per week: ____________________________________________________________
Supervisor (name & title): ____________________________________________________

Student notified [ ] Professor notified [ ]

Signature: _____________________________ Date: ________________________________