

GRADUATE STUDENT APPLICATION FOR TEACHING ASSISTANTSHIP

Term 20_____

This form should be used by all graduate students who wish to be considered for a Teaching Assistantship.

Name:_____ Degree & year _____

Address:_____ Phone (#1): _____

_____ Phone (#2) _____

_____ Phone (#3): _____

_____ E-Mail: _____

_____ ID #: _____

Computer knowledge: (If relevant to the position posting, please list software, hardware etc. and level of familiarity):

Graduate Courses taken (please list all relevant courses):

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

Explain how you meet the specific job qualifications described in the posting(s):

Other relevant courses or experience:

Signature: _____ Date: _____

For Office Use:

Course assigned to TA: _____

Hours per week: _____ Per Term: _____

Course Supervisor (name and title): _____

Student notified: by letter [] verbally [] Professor notified []

Signature: _____ Date: _____