

# 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: \_\_\_\_\_

Courses applied for (in order of preference):

1) \_\_\_\_\_

\_\_\_\_\_

2) \_\_\_\_\_

\_\_\_\_\_

3) \_\_\_\_\_

\_\_\_\_\_

Do you wish to be considered for TA-ships in other courses for which you meet the required qualifications? ( yes / no )

## QUALIFICATIONS:

Language Abilities: Please indicate level of proficiency: 1 = low, 4 = high

English: read (1 2 3 4) written (1 2 3 4) spoken (1 2 3 4)

French: read (1 2 3 4) written (1 2 3 4) spoken (1 2 3 4)

Other:

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

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):

---

---

---

---

---

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: \_\_\_\_\_