

# TA/TF/GSA Teaching Credit Contract Fulfillment

TODAY'S DATE:

NAME:

WHEN DOES YOUR GSA/TA/TF END:

MAJOR:

DATE:

TEACHING TERM:

PROGRAM (circle one):            MBA            CBA            OTHER

ASSIGNMENT (circle one):        TA            TF            GRADER        OTHER

COURSE NUMBER:

NUMBER OF SECTIONS:

NUMBER OF STUDENTS:

NUMBER OF CREDITS:

EXPLAIN RESPONSIBILITIES IN DETAIL:

FACULTY SPONSOR SIGNATURE: \_\_\_\_\_

*To be completed by doctoral office:*

NUMBER OF CREDITS TOWARD TEACHING CONTRACT: \_\_\_\_\_ TA \_\_\_\_\_ TF

DEAN FOR RESEARCH SIGNATURE: \_\_\_\_\_

DOCTORAL DIRECTOR SIGNATURE: \_\_\_\_\_

COPIES SENT DATE:    TO STUDENT: \_\_\_\_\_ TO FILE: \_\_\_\_\_

