COURSE ASSISTANTSHIP APPLICATION UNDERGRADUATE

NAME					
lease Print)	Last	First	Middle	Student ID Number	
				Major / Graduation Year	
Course Code, Section Number, and Title of the course that you will be assisting with. F THIS COURSE MEETS TWICE A WEEK, LIST THE DAY THAT YOU WILL BE ASSISTING ON .				Date of Request	
 APPLICATION CHECKLIST I will be a Sophomore, Junior, or Senior while executing this Course Assistantship. I have previously studied with this instructor. I expect to aid in class set up and assist with demonstrations and critiques, along with any other duties outlined below. I understand that I may only register for ONE Course Assistantship per semester. I understand that only TWO Completed Course Assistantships can count towards my degree. I understand that this Course Assistantship will count as a 3 credit elective. I understand that Course Assistants do not grade students 				Semester to be Completed	
				CA Course Code (REGISTRAR USE)	
			attend each scheduled class.		
DESCRIPTION	OF DUTIES (to be c	ompleted by Instructor)			
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