Sample Teaching Assistant Agreement

TA Name: _____________________________________________________________

Title of Course: _________________________________________________________

Semester: _____________ Year: ____________ Section (if applicable): ____________

Course Instructor: _______________________________________________________

**TA Responsibilities:**

Start Date: _________________________ End Date: ___________________________

Attend Lectures: ______________________ Office Hours per Week: _______________

Number of Homework Assignments to Grade:  ________________________________

Number of Exams to Grade:  _______________________________________________

Laboratory or Studio Duties: _______________________________________________

Optional Teaching Experience: _____________________________________________

Additional Responsibilities:

______________________________________________________________________

______________________________________________________________________

______________________________________________________________________

______________________________________________________________________

Preferred Method Contacting the Course Instructor: _____________________________

Method of mid-semester TA Evaluation: ______________________________________

Method of end-semester TA Evaluation: ______________________________________

TA Signature: ________________________________________ Date: _____________

Instructor Signature: ___________________________________ Date: _____________