



THE UNIVERSITY OF BRITISH COLUMBIA

Faculty of Health and Social Development

School of Health and Exercise Sciences

Okanagan Campus

Teaching Assistant Application Form

Student Application Section – TO BE COMPLETED 1st

1. STUDENT NAME: DATE:

2. STUDENT NUMBER:

3. STUDENT (UBC) EMAIL ADDRESS (THIS NEEDS TO BE THE ONE ON THE SISC SYSTEM):

4. CURRENT ADDRESS:

5. TELEPHONE NUMBER:

6. DID YOU RECEIVE A TEACHING ASSISTANT POSITION LAST YEAR?

YES NO

7. IF YES, WHAT COURSES DID YOU SUPPORT AS A TEACHING ASSISTANT?



8. PLEASE INDICATE THE TA COMMITMENT YOU ARE APPLYING FOR. NOTE: this should include consultation with your supervisor with respect to the timing of planned research studies, travel, comprehensive examination, etc. The committee will work to meet your request; however, this is not guaranteed.

1.0 FTE → (Sept 1 – Apr 30) \$13,597.84 (PhD)

\$13,099.52 (MSc)

1.0 FTE → (Sept – Dec 31 or Jan 1 – Apr 30) \$6,798.92 (PhD)

\$6,549.76 (MSc)

0.5 FTE → (Sept 1 – Apr 30) \$6,798.92 (PhD)

\$6,549.76 (MSc)

0.5 FTE → (Sept 1 – Dec 31 or Jan 1 – Apr 30) \$3,399.46 (PhD)

\$3,274.88 (MSc)

****Note: a full teaching assistantship involves an average of 12 hrs per week**



9. PLEASE INDICATE THE AREAS YOU WOULD PREFER TO WORK IN AS A TEACHING ASSISTANT.

| | | |
|---------------------|-----------------------|---------------------|
| Anatomy | Research Methods | Statistics |
| Exercise Physiology | Physiology | Health Promotion |
| Nutrition | Exercise Prescription | Exercise Psychology |

10. PLEASE LIST ANY SPECIFIC COURSES YOU WOULD PREFER TO WORK IN AS A TEACHING ASSISTANT (although this cannot be guaranteed).

11. PLEASE PROVIDE ANY ADDITIONAL COMMENTS WHICH MAY HELP INFORM YOUR SPECIFIC TEACHING ASSISTANT ALLOCATION:

12. PLEASE PROVIDE THE DETAILS OF ANY EXTERNAL GRANT APPLICATIONS YOU HAVE MADE, AND THE DATE BY WHICH YOU WILL HAVE RECEIVED OFFICAL NOTIFICATION.

13. WILL YOU BE A FULL TIME GRADUATE STUDENT NEXT YEAR?

YES

NO

14. DO YOU PLAN TO BE AWAY FROM CAMPUS DURING THE FORTHCOMING YEAR? IF SO, PLEASE PROVIDE THE DATES OF YOUR ABSENCE.

15. STUDENT SIGNATURE:



Supervisor/Faculty Application Section – To be completed 2nd

1. SUPERVISOR NAME:

DATE:

2. DO YOU WANT THIS STUDENT TO BE SUPPORTED FROM YOUR NOMINAL 2.0 FTE?

1.0 (FULL TA)

0.5 (HALF TA)

NO, BUT STILL SUPPORT THIS STUDENT HAVING A TA IF THERE ARE ANY FURTHER AVAILIABLE.

Note: You may support the application for greater than two (2) Teaching Assistants, however, confirmation of additional Teaching Assistants will depend on availability and is not guaranteed.

Note: Teaching Assistants confirmed for this year, beyond the two (2) Teaching Assistants provisionally allocated, does not guarantee Teaching Assistant support for these individuals in subsequent years. (Notwithstanding TA's with previous experience receive preference).

3. PLEASE PROVIDE ANY ADDITION COMMENTS WHICH MAY HELP INFORM YOUR SPECIFIC TEACHING ASSISTANT REQUEST.

4. SUPERVISOR SIGNATURE: