

Request for Graduate Teaching Assistant to Serve as Instructor of Record

*This form must be submitted each academic year.

TO: Maria Cr	onley, Provost and Vice Pre	esident for Academic Affairs	
FROM:		DATE:	
		COLLEGE:	
ACADEMIC YE	EAR:		
FIRST SEMESTE	ER AS INSTRUCTOR OF REC	ORD: Fall Spring	
		Banner ID:	
Prograi	m of Study:		
request approval for		to teach the course(s) listed below, according Standard	
	qualifications) of the Princi		
			18 graduate semester hours in the
			in the teaching discipline, regular in-
	• •	Deriodic evaluations (http://www.sacscoc.u The as the instructor of record for dual enrollment co	org/pdf/081705/faculty%20credentials.pdf). Please
ποτε. φει τ	sacsede guidennes, d'as may Not serv	e as the mistractor of record for address of the mistractor	
Subject:	Course Number:	Course Name:	Credits:
Subject:	Course Number:	Course Name:	Credits:
,			
direct sup semester	pervision, regular in-service training	g, and planned and periodic observations an estart of the semester please provide an atta	g an explanation of the approach to ensuring devaluations during and at the end of the ached memo explaining why. If approved, this
Require	ed Approvals:		
Departmo	ent Chair	Signature	Date
Associate	e Dean	Signature	Date
College D	ean ean	Signature	 Date
Dean, Col	llege of Graduate Studies	Signature	 Date
Vice Prov	rost/AVP AA	Signature	 Date
Provost/\	VPAA	Signature	