Civil Engineering TA Agreement

Student Name: __________________________     ID Number: __________________________

Course Title(s): ________________________________________________________________

Section(s): ____________  Semester: ______________________  Year: ________________
Faculty: ______________________________________________________________________

Attend Lectures: ________________  Office Hours per week: __________

Number of homework assignments to grade: __________  Exams: __________

Laboratory Duties:  ____________________________________________________________

Other requirements:  __________________________________________________________
____________________________________________________________________________
____________________________________________________________________________
____________________________________________________________________________
____________________________________________________________________________
____________________________________________________________________________

TA Signature   ___________________________________________________________

Faculty Name(s) ____________________________________________

Faculty Signature(s)  ________________________________________

Please give signed copy to Laura Sacco in CEE Office for placement into student file and circulation to GPC Chair