



Mechanical 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) _____