TEMPLE UNIVERSITY

TA/RA Combined Assignment Form

TUid	Student Name	Degree/Program

Academic Year:

School/College:

Dept./Instructional Unit/Center/Institute:

Semester	Course	Section	Credit Hrs		Calculated Clock Hrs/Wk
				x 3.33 =	
				x 3.33 =	
				x 3.33 =	

Semester	Course	Section	Faculty of Record	Hrs/Wk		Calculated Clock Hrs/Wk
Supplementary Activities: e.g., lecture, lab instruction, discussion, recitation, quizzing					x 1.67 =	
Support Activities: e.g., proctor, grade, tutor, exam monitoring, office hours					x 1.00 =	

Semester	Course	Section	Faculty of Record	Hrs/Wk		Calculated Clock Hrs/Wk
Supplementary Activities: e.g., lecture, lab instruction, discussion, recitation, quizzing					x 1.67 =	
Support Activities: e.g., proctor, grade, tutor, exam monitoring, office hours					x 1.00 =	

Semester	Course	Section	Faculty of Record	Hrs/Wk		Calculated Clock Hrs/Wk
Supplementary Activities: e.g., lecture, lab instruction, discussion, recitation, quizzing					x 1.67 =	
Support Activities: e.g., proctor, grade, tutor, exam monitoring, office hours					x 1.00 =	

Supervisor(s):

Dept. Chair or Center/Institute Director:

Project Title:

Semester	Type of Research*	Hrs/Wk		Calculated Clock Hrs/Wk
			x 1.00 =	
Description of Duties:				
Type of Performance Monitoring:				

* May include archival, clinical, field, laboratory, library, museum, survey, or other.

Student: If you agree to undertake this assignment, please sign below and return this form with your acceptance letter.

I, _____ (printed name), accept this assignment.

Signature: _____ Date: _____