TEACHING ASSISTANT APPLICATION Department of Molecular and Cellular Biology Harvard University

| COURSE INFORMATION | | | | | | | | | | | |
|---|-----------------|---|--------------|---------------------------------------|--|--------------------------------|--------------------|-------------------------|------|-------------|--|
| Course Number: | | Term & ` | Term & Year: | | | | Course Instructor: | | | | |
| Number of Section | Two | Two (Please Note: Two or more sections must be approved by the MCB Executive Director.) | | | | | | | | | |
| PERSONAL INFORMATION, CURRENT POSITION, & AFFILIATION | | | | | | | | | | | |
| Name: Home Phone: | | | | | | Email: | | | | | |
| (First/Middle/Last) | | | | | | | | | | | |
| Date of Birth: | | | Check | One: | Single Married Check One: M | | | | le I | Female | |
| Harvard ID: | SS#: | | Stat | atus (Grad Student, Post-Doc, Staff): | | | | | | | |
| Home Address: (Required) | | | | | | University Mailing Address: | | | | | |
| | | | | | | | | | | | |
| Department: | | PI/Lab Di | rector: | Lab Phon | | | Lab Phone: | e: | | | |
| Campus Location (HU, HMS-LMA, MGH or CNY, HSPH): | | | | | | | | Lab Fax: | | | |
| Education | | | | | Previous Teaching Experience | | | | | | |
| Degree/Year | College, Univer | sity, D | iscipline | University | | Course Title | | Instructor Date (Term/Y | | (Term/Year) | |
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| REQUIRED FUNDING INFORMATION | | | | | | | | | | | |
| Please Note: If you are supported by a NIH-NIGMS Fellowship, you cannot teach. Email CV to: maddalen@mcb.harvard.edu | | | | | | | | | | | |
| Paycheck Issued By (Dept./Location): | | | | | Administrator's Name & Tel: | | | | | | |
| Name of Grant or Fellowship: | | | | | Number of Grant or Fellowship: | | | | | | |
| Percentage of Effort Required by the Grant: | | | | | Does the grant from which you are supported restrict the time spent on other activities such as teaching? Yes No | | | | | | |
| Are you supported by a NIH Grant? Ye | | | No | | Are you supported by a NRSA Fellowship? | | | | Yes | No | |
| VISA INFORMATION | | | | | | | | | | | |
| <u>IMPORTANT</u> : If you are on a H-1B visa, you <u>cannot</u> teach . | | | | | | | | | | | |
| Are you on a Visa? Yes No (If yes, please complete the information below.) | | | | | | | | | | | |
| Visa Type: | | | | | Visa Effe | ctive Dates: | | То | | | |
| Please note that you may be asked to provide copies of your visa documentation. | | | | | | | | | | | |
| I have direct deposit. | | | | | I must sign up for direct deposit. | | | | | | |
| Are you legally authorized to work in the | | | | | | | | | | | |
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| Advisor or PI Sign | | Date | | | Applicant Signature | | | | Date | | |
| x x | | | | | | | | | | | |
| Instructor or Preceptor Signature | | | Date | | Executive Director Signature | | | | Date | Date | |