

Instructions for Use:

This form is to be completed in a meeting between the Course Instructor and the Teaching Assistant prior to the end of the first week of the Teaching Assistant assignment. This form is part of the employment contract of the Teaching Assistant. In the event that the Teaching Assistant duties or hours change during the academic term to which this Form applies, a new copy of the Form must be completed to document the change.

Banner ID: Pool Status: Start Date (yyyy/mm/dd):

Term(s): Faculty of Employment:

Course Name/Number: Lecture CRN: CRN (Lab/Tut)

Employee Name: Email:

Work Supervisor: Email:

Status: Full-time graduate student Part-time graduate student Undergraduate student Non-student

Duties	Hours	Details (Include nature of tasks and any expectations for this work. Indicate any weeks where the projected workload is likely to vary from an average of 10 hours).
1. Preparation and Reading	<input type="text"/>	<input type="text"/>
2. Demonstrating/Lab Supervision	<input type="text"/>	<input type="text"/>
3. Leading Tutorial	<input type="text"/>	<input type="text"/>
4. Attending Lectures	<input type="text"/>	<input type="text"/>
5. Marking and Entering Marks List each assignment, including timing, the estimated number of tests/papers, etc. per assignment and the estimated time to mark each assignment.	<input type="text"/>	<input type="text"/>
6. Invigilation	<input type="text"/>	<input type="text"/>
7. Student Consultation (including email)	<input type="text"/>	<input type="text"/>
8. Supervision and Field Trips	<input type="text"/>	<input type="text"/>
9. Meeting with Instructor Regularly	<input type="text"/>	<input type="text"/>
10. Orientation and Required Training	<input type="text"/>	<input type="text"/>
11. Other (as discussed on this date)	<input type="text"/>	<input type="checkbox"/> Additional comments have been added on back of page or attached

Total:

Do you require the TA/Marker to have:

Canvas Access: Yes No

Course instructor signature required for Canvas access:

ACKNOWLEDGEMENT

I acknowledge that my Work Supervisor has discussed my duties and my anticipated weekly hours of work with me.

I understand that courses may be offered online or in-class as determined by the university. Regardless of the mode of delivery, I acknowledge that I am responsible for continuing with the duties as set out within the parameters of Article 17, Hours of Work, and maintaining regular contact with my employment supervisor. As needed I will liaise with my supervisor to ensure that I have the appropriate tools/access to carry out the duties of my TA/RAship. If a change in workload occurs where hours of work are increased, Article 17.05 of the collective agreement will be followed.

[Redacted]

Employee's name

[Redacted]

Signature

[Redacted]

Date (yyyy/mm/dd)

I have discussed these duties and anticipated weekly hours of work with my Teaching Assistant.

[Redacted]

Work Supervisor Name

[Redacted]

Signature

[Redacted]

Date (yyyy/mm/dd)

Additional Comments:

[Large redacted area for additional comments]

Please print and send original with signatures to Human Resources.

- cc: Work Supervisor
- Employee
- Research Supervisor (if applicable)
- Faculty Budget and Planning Officer