

Teaching Experience

This form must be completed on the computer. Please download this form, complete it, save, and email to the next person who needs to sign it. Once signed by the Vice Dean, the scheduling officer will register you for the course.

_____ UID Number	_____ Date
_____ Student Name	_____ Phone
_____ Major	_____ Email
_____ Course Number of class assisting in	_____ Faculty Sponsor

_____ Credit Hours	_____ Term Date	FALL	SPRING	SUMMER
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Teaching Experience – Lab (MEDS-280)

Teaching Experience – Classroom (MEDS-281)

Course Number to be registered for

1. Objective:

To offer the student teaching experience in an undergraduate laboratory/classroom setting.

2. Description of proposal:

1. Student will be required to attend all assigned laboratories/classes and keep a laboratory/classroom notebook, if deemed necessary by the faculty sponsor.
2. Student will present an introductory lecture and/or demonstrate a technique for at least one laboratory/class.
3. During each laboratory/class session, the student is expected to be prepared to help answer questions and assist in laboratory/classroom procedures.
4. Student will be involved in the preparation and administration of quizzes and laboratory/classroom practical exams, and may assist in the grading of quizzes and exams under the direct supervision of the faculty sponsor. However, the faculty sponsor has the ultimate responsibility for assignment of grades for students enrolled in the lab/class.
5. Student may be asked to assist in the preparation of lab/class materials and/or to perform “dry runs” of selected lab/class protocols.

3. Method of Evaluation:

1. Student will meet weekly with the faculty sponsor to address progress towards achieving objectives of the lab/class.
2. Grade will be based on student’s performance and compliance with the Description of Proposal as stated above.

4.

_____ Student Signature	_____ Date
_____ Faculty Sponsor Signature	_____ Date
_____ Vice Dean/Associate Dean Signature	_____ Date