

**Mary Baldwin College  
Office of the Registrar**

**Teaching Assistant Contract**

Name: \_\_\_\_\_ ID: \_\_\_\_\_

Discipline: \_\_\_\_\_ 380 Division: \_\_\_\_\_

Credit requested: \_\_\_\_\_ Grading Option: \_\_\_\_\_

Terms: \_\_\_\_\_ Session: \_\_\_\_\_

Title of Study: \_\_\_\_\_

Description of responsibilities:

Remarks by Supervising Professor:

Date: \_\_\_\_\_

Approved: \_\_\_\_\_  
(Supervising Professor)

cc: Registrar  
Student  
Supervising Professor