ART EDUCATION ASSISTANTSHIP APPLICATION FORM

Name:									
Address:									
Telephone:	residence			cellular			office		
Email:									
			PLEASE	CHECK ALL	ТНАТ АРРІ	v			
Canadian Citizen	PLEASE CHECK ALL THAT APPLY Student Status, Level of Study & language(s)								
S.I.N. Number	1			New student		Returning Student			
Place of Birth				M.A.			Full Time		
Date of Birth	dd mm yyyy			Ph.D.			Part Time		
Student ID #				Language(s)		English	French Other		
If you are a returning	ctudont	place lie	t all assistantshins v	ou bayo b	oon awar	dod in provio	us voars Plaasa	attach a co	aarato shoot
if necessary.	student	•	. ,	ou nave b		· .	,	attacii a se	
Year		Type of Assistants			\$ Amount		Supervisor		Level
If you have taught as			member in the dep	artment,	olease list	all courses ye	ou have taught in	previous y	ears. Please
attach a separate sheet if necessary. Year Course Number Credit Valu									dit Value
	Tee: Course (Vallise)								
Below are the types	of accieta	ntchin acci	gnments available t	to art odu	ration grad	luate student	c Plasse rank in	the order	of your
preference, the type									
Research Assistant # Teach		Teaching Assis	Assistant #		Technical Assistant		#		
Do you object to traveling off-campus to perform your assistantship assignment?							YES	NO	

Submission Deadline: January 15

THIS FORM MUST BE ACCOMPANIED BY AN UPDATED CURRICULUM VITAE AND BE RETURNED WITH YOUR APPLICATION IN PERSON OR BE MAILED TO:

Department/Internship Administrator
Concordia University
Art Education (EV 2-631)
1455 de Maisonneuve Blvd. West, Montreal, Quebec H3G 1M8