PSY 3550: Teaching Assistant in Psychology

To be completed by student: (please print clearly) First/Last Name_____ WIN____ WMU Email_____Phone____ Semester to be registered for PSY 3550 ______ Year_____ To be completed by faculty: The above student has my permission to enroll in **PSY 3550 CRN** ______ in ____ credits ______ credits as a teaching assistant for the following course: **Must Check Appropriate Course** Course TA Is Through ____ PSY 1000 ____ PSY 1600 ____ PSY 2444 ____ PSY 2500 ____ PSY 2517 ____ PSY 3000 ____ PSY 3240 ____ PSY 3260 ___ PSY 3300 ____ PSY 3600 ___ PSY 3844 ____ PSY 4280 PSY 4630 PSY Other: X Graduate Student (Print if applicable)

Date X Faculty Signature (Required) Date ***Please check faulty supervisor: Dr. ____J. Baker ____L. Baker ____Curiel ____Damashek ____DeFulio Gaynor Martini McGee Naugle Pence Peterson Pietras Pinkelman Poling Rafacz Van Houten Other **Return Completed Form to:** emily.a.carey@wmich.edu, Department of Psychology, 3700 Wood Hall (Please Note: Incomplete information and missing signatures will delay your registration)

Date Completed: Completed by: