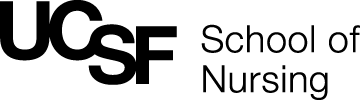
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**University of California, San Francisco**

**School of Nursing**

**Department of NAME**

**NXXX COURSE TITLE**

**NXXX Teaching Assistant (TA)**

XX Quarter 201X

**Estimated number of student enrolling:**

**Co-FOR:**  Yes \_\_\_\_\_\_ No\_\_\_\_\_\_\_\_

**Position Effective Dates (11-13 weeks per quarter unless different # of weeks approved in advance by Associate Dean):**

**Start Date:**

**End Date:**

**Position Description**:

**Responsibilities include**:

**Previous teaching experience preferred:**  Yes\_\_\_\_\_\_\_ No\_\_\_\_\_\_\_\_

**Class time:**

Hours: XX hours per week or XX% effort for the quarter

**Compensation:** {hourly, fee remission, or course credit available}

*Note: if >25% in quarter, student is eligible for fee remission. Fee remission must be pre-approved by the Associate Dean in advance. If a student receives fee remission and works less than an average of 10 hours per week in the quarter, the student must pay the amount of the fee.*

**Contact:** FOR Name, Credentials

**Email:** First.Last@ucsf.edu

**Telephone:** 415-XXX-XXXX