



Complete and return application to:  
Britney Leslie  
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Salt Lake City, UT 84101  
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britney.leslie@nurs.utah.edu

**DEADLINE: Until funding is exhausted**

**Please submit the following documents with your application:**

- Copy of DARS report (you can generate a DARS in CIS)
- Copy of current resume/vitae

**I. PERSONAL INFORMATION**

First Name \_\_\_\_\_ Last Name \_\_\_\_\_

U of U ID# \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Phone (H) \_\_\_\_\_ (W) \_\_\_\_\_ (C) \_\_\_\_\_

Email \_\_\_\_\_

Degree Program \_\_\_\_\_

**Residency Status (check all that apply):**

US Citizen     UT Resident     Out-of-State     International Student

**II. AREA OF INTEREST FOR WORKING AS A TA (please check all that apply)**

\_\_\_ WebCT Course                      \_\_\_ Simulation Learning Center (Skill and Computer Lab)

\_\_\_ Statistics Course                      \_\_\_ Research

\_\_\_ Writing Course                      \_\_\_ Clinical

\_\_\_ Other (Specify \_\_\_\_\_)

How many hours/week would you prefer to work?  10     15     20

Area of specialty/expertise (e.g. med/surg) \_\_\_\_\_

**III. FINANCIAL INFORMATION**

Are you currently employed at the University of Utah?  Yes  No

If yes, what department and how many hours/week\_\_\_\_\_

Are you currently employed outside of the University of Utah?  Yes  No

If yes, where and how many hours/week\_\_\_\_\_

Are you currently receiving any financial aid?  Yes  No

If yes, please specify amount and type:

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**IV. AVAILABILITY (PLEASE SHADE IN THE AREAS YOU ARE NOT AVAILABLE)**

	MON	TUES	WEDN	THURS	FRI	SAT
7:00 - 8:00						
8:00 - 9:00						
9:00 - 10:00						
10:00 - 11:00						
11:00 -12:00						
12:00 - 1:00						
1:00 - 2:00						
2:00 - 3:00						
3:00 - 4:00						
4:00 - 5:00						
5:00 - 6:00						
6:00 - 7:00						

**V. SERVICE LEARNING**

Would you be interested in working with a service-learning course in the undergraduate program for ten hours during the semester for payment of \$1000? The Bennion Center provides training and an orientation to this role. Please mark yes if you would like to be contacted by an Academic Service-Learning course faculty member to discuss their course needs.

\_\_\_ Yes \_\_\_ No

I have read and understood the "Graduate Tuition Benefit Program Guidelines" found at [http://www.utah.edu/gradschool/tuition\\_ben/guidelines.pdf](http://www.utah.edu/gradschool/tuition_ben/guidelines.pdf).

I understand that in order to qualify for the Graduate Tuition Benefit Program, I must be taking 9 graduate level credits.

All the information on this form is true and complete to the best of my knowledge. If asked by an authorized official, I agree to give proof of the information that I have given on this form.

\_\_\_\_\_  
Student Signature

\_\_\_\_\_  
Date