

ANEQ 784 – SUPERVISED COLLEGE TEACHING

Approval Form

Student Name: _____ Semester _____ 20____

CSUID: _____ Student Signature: _____

Student email: _____

Course # Assisting: _____ Section/s: _____

Give details of how student will assist with the course. (Also indicate the amount of time per week or per semester.)

List number of credits previously taken in ANEQ 784 (list course(s), credits and semester).

Course Title	Credits	Semester

TO BE COMPLETED BY FACULTY MEMBER IN CHARGE

What are the anticipated educational benefits for the student assistant?

How will the students in the class benefit from the assistant's involvement?

Number of credits requested for ANEQ 784 _____ *

Note: 1 credit for helping or 2 credits for teaching!

Faculty member Date

Department Approval Date

Note: Grading is on S/U basis only.