

APPLICATION FOR COURSE INSTRUCTOR

2018-2019

NAME:

(Surname)

(First Name)

(Initial)

TELEPHONE NUMBER:

(University)

(Home)

E-MAIL ADDRESS:

MAILING ADDRESS:

WHERE (which university) **AND IN WHAT DISCIPLINE** DID YOU GRADUATE FROM?

YEAR THAT YOUR **FIRST** DEGREE WAS OBTAINED:

AREA OF CURRENT RESEARCH:

FOR WHICH COURSE ARE YOU APPLYING?

PLEASE ATTACH YOUR TEACHING DOSSIER, LISTING YOUR TEACHING QUALIFICATIONS FOR THIS POSITION.

PLEASE RETURN THIS FORM BY 4:00 PM, MAY 9, 2018 TO:

Associate Chair (Undergraduate)
Department of Mechanical and Industrial Engineering
University of Toronto
5 King's College Road, **Room 109**
ugservices@mie.utoronto.ca
Toronto, ON, M5S 3G8