

The Center for Professional Development at Bemidji State University invites faculty and students to participate in the Undergraduate Teaching Associate Program (UTAP). UTAP is designed to support cooperative learning between faculty members and their exceptional students. A full description of UTAP is included here. Also included here is a faculty nomination form. If you choose to participate, this form should be completed jointly by the instructor and student. Please return the faculty nomination form to Keith Gora, Bensen Hall 402, Box #17 or keith.gora@bemidjistate.edu. The instructor must also complete a 4917 TA Arranged Course Request Form and submit it to their department chair and college dean for signatures. You can find this form on the CPD UTAP website.

We look forward to working with you this academic year.

**Keith Gora, PhD**

Director, Center for Professional Development

Coordinator, Undergraduate Teaching Associate Program

Associate Professor, Psychology Department

keith.gora@bemidjistate.edu

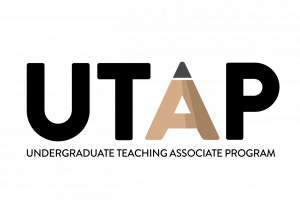
Bensen 402

**Bemidji State University**

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Bemidji, MN 56601-2699

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As an expression of its commitment to teaching and learning, the Center for Professional Development at Bemidji State University has developed a program which allows interested and qualified students to experience some of the challenges and rewards of college teaching by working closely with faculty as they prepare and teach their classes.

Program Features

* Qualified juniors and seniors who have been identified through faculty nominations serve as teaching associates in selected undergraduate courses under the tutelage of interested instructors.
* Participating instructors and students meet several times during the semester at UTAP workshops as part of an informal seminar on college teaching to be conducted by the Center for Professional Development.
* While no stipend is provided to participating students, the university will provide appropriate recognition to those involved. Some resources may be available to fund travel to relevant conferences or other professional development opportunities. Student participation in UTAP will be documented on their transcript as *4917 Teaching Associate*.
* The intention is not for students to be involved in grading papers or in clerical work, but rather to assist in planning and at times in helping to teach classes under faculty supervision.
* Teaching associates may not be concurrently enrolled in the course they are helping to teach.
* The student enrolls for 0-2 credits in the appropriate department as *4917 Teaching Associate* for undergraduates or *5917 Teaching Associate* for graduate students. This course may be repeated and will be graded S or U.

Principles and Obligations

Faculty

* Faculty will not expect students to devote more than six hours per week to their responsibilities in this program, including time spent in the undergraduate class to which they have been assigned.
* Faculty will provide informal instruction and assistance to the teaching associate in accordance with the purpose of the program.
* Faculty will not expect the teaching associate to “cover” classes in the instructor’s absence, or to evaluate or grade student work.
* Faculty will not expect the teaching associate to perform essential clerical tasks such as recording grades.
* Faculty will make a serious commitment to attend UTAP workshops offered as part of the program.

Students

* Students will attend their assigned class regularly and meet according to an arranged schedule with their supervising instructor.
* Students will enroll in a 0-2 credit teaching associate course in the academic department of their supervising instructor.
* Students will attend UTAP workshops offered as part of this program.
* Students may be asked to provide periodic reports to the Center for Professional Development describing the nature of their activities and evaluating the usefulness of the program

**FACULTY NOMINATION FORM**

**Course Information**

Subject, number, and title for which the student will TA:

Semester and year:

Number of UTAP credits:

**Faculty Information**

Name and department:

Office location and number:

Phone number:

Email:

**Student Information**

Name and major/minor:

Academic GPA:

ID:

Email:

**Description**

Please outline in detail the responsibilities the student will have as part of UTAP.

Please ensure that both the student and nominating faculty member have read the attached statement of Principles and Obligations and by signing below agree to these statements.

Faculty Signature\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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

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**STUDENT SCHEDULE**

Your class schedule is requested to arrange UTAP workshops at a time that works well for the student.

Indicate with an ‘X’ times NOT available

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
|  | **Monday** | **Tuesday** | **Wednesday** | **Thursday** | **Friday** |
| **8:00am** |  |  |  |  |  |
| **9:00am** |  |  |  |  |  |
| **10:00am** |  |  |  |  |  |
| **11:00am** |  |  |  |  |  |
| **12:00pm** |  |  |  |  |  |
| **1:00pm** |  |  |  |  |  |
| **2:00pm** |  |  |  |  |  |
| **3:00pm** |  |  |  |  |  |
| **4:00pm and evening classes** |  |  |  |  |  |

Please return the completed Faculty Nomination Form to Keith Gora

Bensen Hall 402, Box #17

keith.gora@bemidjistate.edu