



THE GRADUATE SCHOOL
CLEMSON UNIVERSITY

**NOMINATION FORM FOR OUTSTANDING GRADUATE
TEACHING ASSISTANT**

PLEASE
PRINT

I nominate _____ who is (or was) a
Graduate Teaching Assistant in _____ during the
(course number, section)
_____ semester, _____
(fall, spring or summer) (year)

Overall GPA _____

Supporting *Letters of Reference* (attached) are provided by the following faculty and students (person making nomination should include his or her name below in appropriate category):

Faculty (two maximum)

Department

1) _____
2) _____

Students (two required)

Major

1) _____
2) _____

- check if additional letters are attached
 check if letters of support from fellow GTAs are attached

signature of person making nomination

phone

Signature indicating that the nominee listed above has been selected as a nominee from the department

signature

title

date

Signature indicating that the nominee listed above has been selected as a collegiate representative

signature

title

date

Signature indicating that the graduate teaching assistant is in good academic standing

signature

title

date

