

**Request for Informal Teaching Experience
(Pre-Approved) at AMNH or a Partner Institution**

Student Name:

Date:

Institution or AMNH
Department sponsoring
Teaching Experience:

Formal

Informal

Instructor/Mentor:

Course or Program
Name (and Number and
Title, if applicable):

Year of
Course/Program:

Term of Course/
Program:

The course or program need not be limited to one term; please specify as appropriate.

Please provide any information about updates to this graduate teaching position or aspects that are unique to this instance of the Teaching Experience, and the current syllabus and URL/web link, as applicable. Ex. Courses taught at BRF which are unique and created individually by each student; particular content taught in SRMP; specific SoS courses selected, etc.

Please provide a brief statement about what your general responsibilities for THIS INSTANCE of the teaching experience will be; specific teaching and pedagogical skills you are expected to learn and implement; what kind of advising and mentoring you may provide to students; learning materials will you develop and utilize; what kinds of assignments, exams or projects will you create/lead/guide, etc.

Please outline what your time commitment for the course will be:

Any other comments:

RGGS Administrative Approval:

Director of Administration

Date

For RGGS Administration Use Only

Informal Teaching Experience

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RGGS Confirmation of Instructor/Mentor Approval Requested

(Date: _____)

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RGGS Confirmation of Instructor/Mentor Approval Received

(Date: _____)