

Teaching Academy Fellows Program Application/Nomination Form Information

(to be filled out by the nominee)

Date:

Name:

Academic Rank:

UGA full-time start date:

School/College:

Department:

Email:

Campus Phone:

A brief description of your teaching-related duties

A brief description of what you hope to gain by becoming a Teaching Academy Teaching Fellow

I _____, commit to attend the six required Teaching Academy Fellows Program dinners and to participate in the small group sessions as scheduled by our small group and mentors.

Signature

Teaching Academy Fellows Program Application/Nomination Form

Nomination

(to be filled out by the nominator)

Name _____

Email _____

I am the nominee's

Department Head

Dean/Associate Dean

Director

Colleague

Member of Teaching Academy

Past TA Fellow

Please summarize briefly what positive contributions to discussions of teaching, research, and service the nominee will bring to the Teaching Academy Fellows Program.