

DEPARTMENT OF MATHEMATICS AND STATISTICS UNDERGRADUATE MARKER & COURSE ASSISTANT

Date: _____

(check all that apply)

Fall: _____ Winter: _____ Fall/Winter: _____ Spring: _____ Summer: _____

Eligible to work at Queens?: Yes / No

Name: _____

Address: _____

Telephone: _____ E-Mail: _____

Student #: _____ Program Year: _____

Faculty: _____

Courses Taken and Marks Received:

Marking Experience:

I am willing to mark the following courses: _____

Do you have a valid Social Insurance Number: Yes ___ No ___

I give permission to access my academic records. Signature: _____
