DEPARTMENT OF PHILOSOPHY
PER COURSE APPOINTMENT APPLICATION FORM

Complete this form in full and submit, **by email**, to Jill Robinson, Administrative Secretary, Department of Philosophy, Memorial University at jillr@mun.ca by the relevant application deadline. Please cc Dr. Arthur Sullivan, Head, Department of Philosophy, Faculty of Humanities and Social Sciences, Memorial University arthurs@mun.ca.

LAST NAME   _____

FIRST NAME   _____

MAILING ADDRESS   _____

CITY   _____   PROVINCE   _____

POSTAL CODE   _____

PHONE _____ (HOME) _____ (OFFICE) _____

EMAIL _____

1.   Are you legally entitled to work in Canada (i.e., Canadian citizen, permanent

      resident)?   [   ] Yes   [   ]   No

2.   Presently applying to which Department(s)? List all.

      _____

3.   Seniority credits (as of latest Seniority list) _____

4.   Specify the number of courses you would like to teach per term (subject to a maximum of 2 courses per semester):

      Fall _____ Winter _____ Spring _____

5.   Specify the number of courses you would like to teach in each semester:

      Fall   number of courses _____

      Winter   number of courses _____

Spring   number of courses _____

6. You will be considered only for courses you list below (list only posted courses). Please indicate the complete course number(s), section number(s), course title(s), (e.g. PHIL 2551-001; Health Ethics). Though you may receive courses from any listed below, please list courses in order of preference. If more space is needed, attach copies of this page.

CourseNumber	Course Section	Course Title	Days	Time
Eg. Phil 2551	081	Health Ethics	WWW	99

7. If additional courses become available on short notice do you wish to be considered? (subject to a maximum of two courses per semester)

       [   ]   Yes   [   ]   No

Please ensure that an up to date copy of your CV is on file in the departmental office. If you are applying for a course(s) that you have not taught at Memorial before, please attach a separate sheet demonstrating your qualifications in this area, and your CV.

You are responsible for keeping a copy of this application.

_____   _____

Signature   Date