

Department of Mathematics and Statistics

SESSIONAL INSTRUCTOR APPLICATION FORM

NAME:								
	ecture times and t						tion please note t essary, please add	
Priority	Course Code	Term	Priority	Course Code	Term	Priority	Course Code	Term
1.			4.			7.		
2.			5.			8.		
3.			6.			9.		
10.			11.			12.		
Windsor,	outside our dep	oartment, a	s a Session		Fall Winter at the Uni		ARS, PLEASE ALSO	COMPLETE
E-MAIL:	 N:		CITIZ	ZEN OR PERMAI	NENT RES	SIDENT OF (CANADA?	
Degree	Discipline		Year	Institution (in	clude dep	partment)		
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This form was updated on January 25, 2019

mthsta2@uwindsor.ca

Also, please send your current Curriculum Vitae, and arrange for three reference letters to be sent, to Rose Spence