



**GRADUATE TEACHING ASSISTANTSHIP FORM AND INTERVIEW PROCESS
DEPARTMENT OF EXERCISE AND SPORT SCIENCE
THE UNIVERSITY OF NORTH CAROLINA AT CHAPEL HILL**

Name _____ Date _____

Age _____ Male/Female (circle) _____ T-shirt Size _____

Specialization Area Athletic Training Exercise Physiology Sport Administration

Permanent Home Address _____ Phone (home) _____
 _____ Phone (cell) _____
 _____ Email _____

Address You Can be Reached in June/July/August _____ Summer phone _____
 _____ Summer email _____

Undergraduate College(s) attended and graduated from (and location)

Grade Point Average _____ (international students put down overall passing marks)

GRE Scores VERBAL _____ % _____ QUANTITATIVE _____ % _____ ANALYTICAL _____ % _____

International Students: TOEFL Scores _____

All Applicants

Teaching Experience (Check where appropriate)

Student teaching in physical education: Grade Level _____
 Private lessons and/or camps: Number of years _____
 Private/Public school teaching Number of years _____
 Coaching (please specify) _____
 Other (please specify) _____

LIST ALL CURRENT CERTIFICATIONS (CHECK WHERE APPROPRIATE)

AHA or Red Cross CPR	Yes _____	Instructor level _____
Red Cross First Aid	Yes _____	Instructor level _____
Physical Therapy (USA)	Yes _____	
NSCA-CSCS	Yes _____	
ACSM	Yes _____	(if yes, describe) _____
Coaching	Yes _____	(if yes, describe) _____
Other fitness/aerobics	Yes _____	(if yes, describe) _____
Lifeguard/WSI/aquatics	Yes _____	(if yes, describe) _____
Teaching certification	Yes _____	(if yes, describe) _____
Certified Athletic Trainer	Yes _____	(if pending, date expected) _____
Other certifications/licensures	_____	

Listed below are some of the courses taught in The University of North Carolina Lifetime Fitness/Physical Activities Program. Please select from these courses those in which you are **able** to teach, as well as those you prefer to teach. Please prioritize those classes you would prefer to teach. Please list the skill level (Beginning, Intermediate, Advanced). If there is a special skill you have, and a similar class is not listed, please make a special note.

Activity	Prefer to Teach/Prioritize	Skill Level
___ Aerobics	_____	_____
___ Badminton	_____	_____
___ Cycling/Spinning	_____	_____
___ Exercise & Conditioning	_____	_____
___ Golf	_____	_____
___ Indoor Sports (Basketball, Indoor Soccer, Volleyball)	_____	_____
___ Jogging	_____	_____
___ Outdoor Sports (Soccer, Flag Football, Ultimate Frisbee)	_____	_____
___ Racquet Sports (Badminton, Racquetball, Tennis)	_____	_____
___ Racquetball	_____	_____
___ Ski/Snow Boarding	_____	_____
___ Soccer	_____	_____
___ Swim Conditioning	_____	_____
___ Swimming	_____	_____
___ Tennis	_____	_____
___ Ultimate Frisbee	_____	_____
___ Volleyball	_____	_____
___ Walking	_____	_____
___ Weight Training	_____	_____
___ Yoga/Pilates	_____	_____
___ Other	_____	_____

PLEASE UPLOAD THIS APPLICATION TO YOUR GRADUATE SCHOOL APPLICATION UNDER SUPPLEMENTAL DOCUMENTS.

For more information about the Lifetime Fitness/Physical Activities Program, please see our website at:
<http://exss.unc.edu/liftphya>