**OUTSTANDING TEACHING ASSISTANT AWARD (OTAA)**

**ELIGIBILITY FORM**

The undersigned has been nominated for this year’s Outstanding Teaching Assistant Award. To qualify for this award, the nominee must have served as a teaching assistant (TA) at FSU for at least two completed semesters, one of which must have been during the **Spring 2020**, **Summer 2020**, or **Fall 2020** time period, and must be a current FSU graduate student in good academic standing.

Please check **ALL** that apply:

|  |  |
| --- | --- |
|  | Current degree-seeking graduate student at FSU |
|  | Currently in good academic standing |
|  | Served as a TA for Spring 2020 at FSU |
|  | Served as a TA for Summer 2020 at FSU |
|  | Served as a TA for Fall 2020 at FSU |
|  | Served as a TA for at least 1 other semester at FSU (if did not serve as a TA for 2 of above-mentioned semesters) |
|  | Not a previous OTAA winner |
|  | Not a current PIE Associate |
| The nominee and faculty supervisor both verify that the nominee fulfills the above requirements to qualify for the Outstanding Teaching Assistant Award.    Name of Nominee **[PLEASE PRINT]:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**  First Name Last Name  Name of Supervisor **[PLEASE PRINT]:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**  First Name Last Name  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Signature of Nominee Signature of Supervisor  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_  Date Date | |