The Teaching Citation: Registration Checklist

The Teaching Citation, an optional program for Ph.D. students at Washington University, is administered by The Teaching Center and the Graduate School. For details, see http://teachingcenter.wustl.edu/teaching-citation. Interested students are responsible for completing all requirements and for using this form to document the activity by collecting all approval signatures noted below.

**Student Name (please print):** ___________________________________________  **Student ID #:** __________________  **Dept.:** __________________

**Last, First**  
**School:** ________________

**Teaching Center Staff:** PRINT NAME _______________________

**Teaching Center Staff:** PRINT NAME  
**SIGNATURE AND DATE**

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**I. Initial Teaching Center Consultation**

An initial consultation is required (recommended to occur in 1st or 2nd year). Subsequent meetings to track progress will be necessary.

**Teaching Center Staff:** PRINT NAME _______________________

**SIGNATURE AND DATE**

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**II. Training on Teaching (For additional details, please consult The Teaching Center).**

Five advanced-level workshops are required (including *Pedagogies in the Humanities, Arts, and Social Sciences Workshops*; *Professional Development in Teaching Workshops*; or *STEM Pedagogies Workshops*). However, only one of the advanced-level workshops may be from the *Professional Development in Teaching Workshop Series*. In addition, other workshops, such as a departmental teaching course or introductory-level workshop may count toward one of five required workshops, with approval by the departmental Director of Graduate Studies (DGS) and The Teaching Center.

<table>
<thead>
<tr>
<th>Teaching Experience 1</th>
<th>Teaching Experience 2</th>
<th>Teaching Experience 3</th>
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</thead>
<tbody>
<tr>
<td><strong>PLEASE PRINT: EACH COURSE OR WORKSHOP TITLE, SEMESTER, YEAR</strong></td>
<td><strong>Teaching Center Staff: PRINT NAME</strong></td>
<td><strong>Teaching Center Staff: SIGNATURE AND DATE</strong></td>
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Director of Graduate Studies approves a departmentally teaching-related requirement to be counted as one advanced-level workshop. Please describe the requirement in one of the rows above.

**Director of Graduate Studies:** SIGNATURE AND DATE

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**III. Required Teaching Experiences (3)**

Each semester-long experience must involve more than grading, writing exams, and holding office hours. For additional details, please consult The Teaching Center.

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<th>Teaching Experience 3</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>PLEASE PRINT: COURSE NUMBER AND TITLE; SEMESTER AND YEAR (e.g. L33 100 Intro to Psychology; Summer 2014)</strong></td>
<td><strong>Faculty Evaluator: PRINT NAME</strong></td>
<td><strong>Teaching Center Approval</strong></td>
</tr>
</tbody>
</table>

**Teaching Center Approval:** Teaching Center signature below indicates that 1) each teaching experience meets criteria for the Teaching Citation and 2) the student named above has presented to Teaching Center staff the faculty and student evaluations required for each experience.

**Teaching Center Staff: PRINT NAME**

**Teaching Center Staff: SIGNATURE AND DATE**
The Teaching Citation: Registration Checklist

Student Name (please print): ______________________________________________________ Student ID #: _____________________

Last, First

IV. Additional Departmental Approvals

| The student named above has submitted a Teaching Philosophy Statement for departmental approval. | The student named above has satisfactorily completed the minimum teaching components of the PhD program. |
| ______ (✓) | ______ (✓) |

Departmental Director of Graduate Studies: PRINT NAME ______________________________________________________

SIGNATURE AND DATE ______________________

V. Final Teaching Center Approvals

| The student named above has submitted a Teaching Philosophy Statement for Teaching Center approval. | The student named above has completed all Teaching Citation requirements listed above. |
| ______ (✓) | ______ (✓) |

Teaching Center Staff: PRINT NAME ______________________________________________________

SIGNATURE AND DATE ______________________

TO FILE FOR COMPLETION OF THE TEACHING CITATION:

After collecting all of the above signatures, the student should deliver this form to the Registrar of the Graduate School in Cupples II, Suite 204. This form should be submitted to the Registrar of the Graduate School when complete and no later than the deadline for the submission of the dissertation. Once approved, the Teaching Citation will be recorded on the University Transcript.

VI. Approval of the Dean of the Graduate School

Dean, Graduate School: PRINT NAME ______________________________________________________

SIGNATURE AND DATE ______________________