

Semester

Registration for Teaching Assistants (Tutorat)

Linguistik Zentrum Zürich - Monomaster Linguistics

FS20 ____

Teaching Assistant (Tutorat), Third-Country Nationals

Course Title							
Lecturer(s)							
Last / First Name							
Address*							
Phone no. / Email							
Status	M	A	Ph[)			
Student ID no.					3 ECTS poi	nts or	payment
* home address in Switze	erland						
Date:	Signature Student:						
Date: Signature Module Coordinator: Registration can only proceed if both parties (student AND module coordinator) have signed.							
If you want to receive (please note that paymer Bank / Postfin.					s, piease iiii out	the foll	lowing neius.
Address of bank							
IBAN							
BIC/SWIFT							
Beneficiary							
Date of Birth	Marital status						
Married with Swiss	citizen or	a foreign	er with	n a C resi	dence permit		
Place of origin			N	lationalit	У		
Already employed	at UZH?	Yes	No	Depart	tment		

HS20____

Please include:

- a copy of your AHV/IV-card (or a copy of your Swisscare excemption from SV/insurance)
- a copy of your passport or ID
- a copy of your residence permit
- a copy of your work permit or completed form 'Work Permit' (in case of payment)
- completed form "Ergänzende Angaben zur Quellensteuer" (see here for more information)