

Faculty Request for Library Instruction

1. Instructor: _____

2. Instructor Email: _____

3. Department _____

4. Course Name: _____

5. Today's Date: _____

Please Attach Class Roster to This Page When You Return the Form

What date and time would you like to schedule your library orientation session?

1st Choice	Date	Time	2nd Choice	Date	Time
Section 1			Section 1		
Section 2			Section 2		
Section 3			Section 3		
Section 4			Section 4		

6. Where would you prefer to have the library instruction? (**Please see below)

_____ Computer Lab

_____ Your classroom: Room # Session 1 _____ Session 2 _____ Session 3 _____ Session 4

_____ Library

7. What would you like your students to learn from this library instruction session?

8. Should the library instruction be geared toward a specific assignment your students will be completing? If so, please describe the assignment. (It is very helpful to us if you provide us with any handouts you give to students explaining the assignment.)

9. How many students are in your class? (approximately) _____

10. Phone number(s) where you can be reached _____

****Instructors MUST be present at the instructional sessions.**
****Instructional sessions need to be scheduled at least three days in advance.**
****No instructional sessions will be conducted before 8:30 a.m. or after 7:00 p.m.**
****Instructional sessions will be conducted Monday - Thursday only.**

A library staff member will contact you to discuss the content of the instruction session and to confirm the date and time.

Thank you for helping us to promote library and information literacy skills!