TEMPLE UNIVERSITY
SMART CLASSROOM REQUEST FORM

Note: Please complete this form in full, and return it to your Dean's Office. Please note that smart rooms are subject to availability and, therefore, they are not guaranteed. Also, if you need software installed, please fill out the Temple University Request for Instructor Software in Technology Classrooms form (F-46), available on the Computer Services website.

INSTRUCTOR INFORMATION

First Name _____ Last Name _____ Department _____

Office phone _____ Home phone _____ E-mail _____

COURSE INFORMATION

Department/Course number/Section _____ Course Title _____

Semester/Year _____ Meeting days/time _____ CRN (if known) _____ # of seats authorized _____

CLASSROOM NEEDED

☐ Computer Classroom (Lab) Building Preference: _____
☐ Smart Classroom

EQUIPMENT USE

Please check the computer you need and indicate how often you will use it with the numbers shown below. If you do not complete the numbers, we will assume you will use it occasionally. Indicate any other equipment (and usage) on the line marked "Other." We cannot process your request without this information. Thank you.

*** 1 = every class * 2 = occasional to frequent * 3 = no more than two times**

☐ PC ___ use* ☐ Mac ___ use* ☐ Other: _____

SIGNATURES

Instructor's signature _____ Date _____

Dean or Authorized Signature _____ Date _____

ADMINISTRATIVE USE ONLY

Room Assigned _____ Rooms posted to ISIS _____