



# FAIRLEIGH DICKINSON UNIVERSITY

## COMPUTING SERVICES

### LAB RESERVATION REQUEST



SEMESTER: \_\_\_\_\_

COURSE NUMBER: \_\_\_\_\_ COURSE TITLE: \_\_\_\_\_

DEPARTMENT: \_\_\_\_\_ INSTRUCTOR: \_\_\_\_\_

DEPT. MAILING CODE: \_\_\_\_\_ INSTRUCTOR'S EMAIL: \_\_\_\_\_

DEPT. PHONE NUMBER: \_\_\_\_\_ INSTRUCTOR'S PHONE NUMBER: \_\_\_\_\_

DEPT. FAX NUMBER: \_\_\_\_\_ PREFERRED CONFIRMATION: PHONE/FAX/EMAIL  
(CIRCLE ONE)

**FACILITY REQUESTED: (CHECK ONE)**

<p><u>MADISON</u></p> <p><input type="checkbox"/> PC</p> <p><input type="checkbox"/> MULTI-MEDIA LAB</p>	<p><u>HACKENSACK</u> (DICKINSON HALL)</p> <p><input type="checkbox"/> PC</p>	<p><u>TEANECK</u> (UNIVERSITY HALL)</p> <p><input type="checkbox"/> PC</p> <p><input type="checkbox"/> MULTI-MEDIA LAB</p>
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*ALL COMPUTER LABS ARE EQUIPPED WITH LCD OVER-HEAD PROJECTOR. FOR MORE INFORMATION ON AUDIO VISUAL EQUIPMENT PLEASE VISIT <http://oat.fdu.edu>*

**ROOM RESERVATION: (CHECK ONE)**

- THE ROOM WILL BE REQUIRED FOR THE ENTIRE SEMESTER. FAX TO: ENROLLMENT SERVICES  
COLLEGE AT FLORHAM - EXT. 8616, METROPOLITAN CAMPUS - EXT. 2209
- RESERVATION IS FOR THE FOLLOWING DAYS. FAX TO: COMPUTING SERVICES  
COLLEGE AT FLORHAM - EXT. 8886, METROPOLITAN CAMPUS – EXT. 7158

**TIME(S) REQUESTED:**

<u>DAY</u>	<u>DATE</u>	<u>START TIME</u>	<u>END TIME</u>
_____	_____	_____ <input type="checkbox"/> AM _____ <input type="checkbox"/> PM	_____ <input type="checkbox"/> AM _____ <input type="checkbox"/> PM
_____	_____	_____ <input type="checkbox"/> AM _____ <input type="checkbox"/> PM	_____ <input type="checkbox"/> AM _____ <input type="checkbox"/> PM
_____	_____	_____ <input type="checkbox"/> AM _____ <input type="checkbox"/> PM	_____ <input type="checkbox"/> AM _____ <input type="checkbox"/> PM
_____	_____	_____ <input type="checkbox"/> AM _____ <input type="checkbox"/> PM	_____ <input type="checkbox"/> AM _____ <input type="checkbox"/> PM

NUMBER OF STATIONS REQUIRED \_\_\_\_\_

SPECIAL SOFTWARE REQUIREMENTS \_\_\_\_\_

INSTRUCTOR'S SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_

OFFICE USE ONLY

APPROVED	YES	NO	DATE _____
PROCESSED BY _____			ROOM _____
COMMENTS _____			