

DMEC Workshop Scheduling Form

Workshop Title _____

Workshop Description _____

Workshop Date _____

Target Audience _____

Beginning Time _____

Ending Time _____

Number of Participants _____

Lunch _____yes _____no

Person Responsible for set-up _____

(room, lunch, handouts, etc.)

Room Requested

Rm A _____ Rm B _____ Rm C _____ DL Lab _____ Tech Lab _____ DL3 _____

Outside Location _____

Equipment Needed

TV _____ VCR _____ DVD _____ Computer for

Presenter _____

Computers for Participants _____ (limit of 25) ELMO _____ LCD _____

Do you want this open to registration on ESC Works? _____yes _____no _____private

Do you want an evaluation emailed to participants? _____yes _____no

Presenter Info: _____

This form will be required before a workshop will be scheduled.

All information is required in order to schedule a workshop.