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| **Course Evaluation Request Form** |
| **To:** | Course Evaluation Services, ICIT |  |
|  | opscan@uww.edu |  |
| Directions:  | * For requests for printing or scanning, complete this request form and the Course Evaluation Class List Form and email both to Course Evaluation Services at opscan@uww.edu
 | * Include a printed copy of this form when dropping off completed evaluations at the TSC Helpdesk for scanning.
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|  | **Requester Information** | **Additional Contact, If Applicable** |
| **Department:** |   |   |
| **Name:**(Requester is usually the Dept.'s ADA) |   |   |
| **Email:** |   |   |
| **Send reports to these email addresses? Yes/No** |   |   |
| **Phone extension:** |   |   |
| **Semester the evaluations are for:** |  |   |
| **Date request is made:** |   |   |
| **Request for printing AND scanning? Yes/No****Yes-** If you have Course Evaluation Services print your evaluations.**No-** If you supply your own evaluations and are only having them scanned by Course Evaluation Services. |  |  |
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| **Additional Notes:** |   |