

Library/ Media Services Project Planning Sheet

A MAXIMUM OF THREE DAYS IN A WEEK

Substitute teachers are NOT allowed to bring classes to the library

Reservations are to be made 2 school days in advance. This form must be returned within 24 hours of request. If not returned, scheduled dates will be lost.

Teacher _____ **Co Teacher** _____

Dept. _____ **Course** _____ **Grade Level** _____

Check the Period(s) of Use:

1 _____ 2 _____ 3 _____ 4 _____ 5 _____ 6 _____ 7 _____ 8 _____ 9 _____ 10 _____ 11 _____

Period(s) with the Co-Teacher

1 _____ 2 _____ 3 _____ 4 _____ 5 _____ 6 _____ 7 _____ 8 _____ 9 _____ 10 _____ 11 _____

Today's Date: _____ **Date(s) Needed:** _____

Assignment Title:

What services would you like the librarians to provide?

_____ **L A P T O P A N D P R O J E C T O R**

Information on:

_____ **Electronic Databases** _____ **Internet Searches** _____ **Book Talks**

_____ **Google Docs** _____ **Literary Criticism**

_____ **Other** _____

_____ **Book Cart?..... Titles or Subjects** _____

_____ **Web Links?..... Attach Web Address(es)** _____

What do you want your students to have as a result of the library visit?

_____ **Printed Document, Paper**

_____ **Black/White** _____ **Color**

_____ **Printed Document, Brochure/Flyer**

_____ **Black/White** _____ **Color**

_____ **Saved Data/Project**

_____ **H: drive** _____ **R: drive** _____ **Flash Drive**

_____ **Google Drive** _____ **Drop Box**

_____ **Other**

To Be Completed by Library Media Services Staff

Library activity reservation confirmed by: _____ **Date:** _____

Seating Chart: _____