Request for Audio-Visual Materials

Name of Material Requested:	
Type of Material: DVD CD-ROM Other:	
Source:	
Cost: Number Requested	d: Previewed: YES NO
In which program and course will this be used?	
Does this replace media currently being used?	If so, which one(s)?
How will this material be used?	
To what course and unit objectives is this material related?	
Date Requested:	Date Needed:
Requested by:	Office phone: