Fitchburg State College
Center for Professional Studies (CPS)

Classroom Needs Form 3/08

Course Name: _____ **Dates of Course:** _____

Instructor: _____ **Telephone Number:** _____

E-Mail Address: _____

List dates and times of labs (Science and/or Computer) needed in addition to classroom:

Audiovisual Needs:

- ☐ **Laptop Computer (Specify PC or Mac iBook: _____)**
- ☐ **Projector (Specify format—Film, Multimedia, Overhead or Slide: _____)**
- ☐ **CD/DVD Drive**

Other:

Other Needs:

Would you like to request any catering? If yes, please specify: