

**INSTRUCTOR AND COURSE EVALUATION SYSTEM**

**FACULTY REQUEST FORM**

① CODE IN YOUR LAST NAME

FIRST INIT. ② DEPT. NAME

③ CLASS TYPE

Check one only

- Lecture
- Lecture/Discussion
- Discussion/Quiz
- Laboratory
- Seminar
- Team Taught
- Other

OFFICE USE ONLY

SECTION

A	0	0
B	1	1
C	2	2
D	3	3
E	4	4
F	5	5
G	6	6
H	7	7
I	8	8
J	9	9

OFFICE USE ONLY

DEPT. CODE

0	0	0	0	0
1	1	1	1	1
2	2	2	2	2
3	3	3	3	3
4	4	4	4	4
5	5	5	5	5
6	6	6	6	6
7	7	7	7	7
8	8	8	8	8
9	9	9	9	9

SPR

DIS. CODE

1
2
3
4
5
6
7

④ COURSE NUMBER

<input type="text"/>	<input type="text"/>	<input type="text"/>
0	0	0
1	1	1
2	2	2
3	3	3
4	4	4
5	5	5
6	6	6
7	7	7
8	8	8
9	9	9

⑤ NO. OF FORMS REQUESTED

<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
0	0	0	0
1	1	1	1
2	2	2	2
3	3	3	3
4	4	4	4
5	5	5	5
6	6	6	6
7	7	7	7
8	8	8	8
9	9	9	9

⑥ YOUR RANK

- Teaching Assistant
- Instructor/Lecturer
- Assistant Professor
- Associate Professor
- Professor
- Other

PLEASE COMPLETE INFORMATION IN BOXES 7 (TO THE RIGHT) AND 8-11 (BELOW) BEFORE SELECTING ITEMS OR FORMS ON BACK SIDE.

⑦ RELEASE INFORMATION

PLEASE DESIGNATE THOSE INDIVIDUALS WHO MAY OBTAIN YOUR RESULTS

Incomplete List Of Teachers Ranked As Excellent By Their Students.....	YES	NO
University Student Publication (automatically adds items) .....	<input type="radio"/>	<input type="radio"/>
Department Head, Chp., or other person .....	<input type="radio"/>	<input type="radio"/>

INDICATE PERSON TO WHOM DATA MAY BE RELEASED

CAMPUS ADDRESS: \_\_\_\_\_

IMPORTANT: YOUR SIGNATURE IS NECESSARY FOR RELEASE

SIGN HERE

PLEASE COMPLETE INFORMATION BELOW

⑧ SECTION: \_\_\_\_\_

⑩ CAMPUS PHONE: \_\_\_\_\_

⑨ DATE NEEDED: \_\_\_\_\_

⑪ CAMPUS ADDRESS: \_\_\_\_\_