

Supplemental Instruction (SI) Support Request

Directions: The following steps must be in place before SI support request can be considered:

1. Support of Department Chairperson
2. Support of Instructor(s) for the course
3. Commitment by the department to fund the SI leader position if support is beyond the Academic Success Center's general budget.

Semester for which SI support is being requested:

- | | |
|--|---------------------------------------|
| <input type="checkbox"/> Fall | <input type="checkbox"/> Winter |
| <input type="checkbox"/> Spring/Summer | <input type="checkbox"/> Summer I, II |

Please allow one semester in advance to implement SI for your requested course. This will allow time for planning, recruiting and SI leader training.

Course Information:

Course Number & Section: _____

Title of Course: _____

Class Meeting days/times: _____

Instructor Information:

Instructor Name: _____ Department: _____

E-mail: _____ Office Location: _____ Phone #: _____

Is the instructor aware of SI support request for this course? Yes No

Funding:

If SI for this course cannot be funded through the Academic Success Center's general budget, is your department willing to transfer \$2500 (per semester to cover the wages for one SI leader) to the Academic Success Center in order to have SI support for this course?

Yes No

SI Leader Recommendation (provide name & access ID of students whom you would recommend as potential SI leaders for this course):

Additional Information (any information that is pertinent to this partnership):

I understand that this request does not guarantee SI support unless all involved parties are in agreement with the terms.

Professor / Instructor Signature

Department Chair Signature

Date