

ARTS DIVISION READER REQUEST FORM

DEPARTMENT: _____

Please provide a [Reader Description of Duties Form](#) to the reader directly or submit it with the Reader Request Form.

NAME: _____

EMAIL: _____

BEGIN DATE: _____

END DATE: _____

* End date typically aligns with grades due date

HOURS PER WEEK: _____

COURSE NAME: _____

COURSE #: _____

INSTRUCTOR: _____

UNDERGRAD GRAD NON-STUDENT

FOAPAL TO BE CHARGED: _____

COMMENTS:
