



**S T U D E N T   S U C C E S S   C E N T E R**

# Learning Lab Reservation Form LR118

*Please attach all information relevant to this reservation*

**Today's Date:** \_\_\_\_\_

**Reservation Day/Date (s):** \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Reservation Time (s):** \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Course:** \_\_\_\_\_

**Instructor:** \_\_\_\_\_

**Instructor's Extension:** \_\_\_\_\_

**Instructor's email:** \_\_\_\_\_

**Number of Stations Needed:** \_\_\_\_\_

**Projector? Yes** \_\_\_\_\_ **No** \_\_\_\_\_

**Room Divider? Yes** \_\_\_\_\_

**No** \_\_\_\_\_

**Roster Attached: Yes** \_\_\_\_\_

**No** \_\_\_\_\_

***Please submit this form through email to [studentsuccess@csmd.edu](mailto:studentsuccess@csmd.edu), through interoffice mail or in person in the Student Success Center, LR120.***

*You will receive an email confirming your reservation. Thank you*

**For SSC Use Only**

Date Entered on Calendar/Initials: \_\_\_\_\_

Approved by: \_\_\_\_\_