

**ITforFIT**  
Academic Computing Center  
[www3.fitnyc.edu/IT](http://www3.fitnyc.edu/IT)

**Request To Reserve Computer Rooms**

**Please complete a separate form for EACH COURSE SECTION! Submit completed forms to:**

Carolyn Rieger – Academic Computing Center - Room C220 Ext. 7-3520 – [Carolyn Rieger@fitnyc.edu](mailto:Carolyn.Rieger@fitnyc.edu) or [Amanda@fitnyc.edu](mailto:Amanda@fitnyc.edu)

Date of Request: \_\_\_\_\_ PC \_\_\_\_\_ Mac \_\_\_\_\_

Requested by: \_\_\_\_\_ Internet Required: Yes \_\_\_\_\_ No \_\_\_\_\_

Software Requirements: \_\_\_\_\_

Course No.: \_\_\_\_\_ Section No.: \_\_\_\_\_

**-office use only-**

<b>1.</b> Day: _____	<input type="checkbox"/> Scheduled	Room #: _____
Date: _____	<input type="checkbox"/> Scheduled	Room #: _____
Time: from _____ to _____	<input type="checkbox"/> Notified	_____
<b>2.</b> Day: _____	<input type="checkbox"/> Scheduled	Room #: _____
Date: _____	<input type="checkbox"/> Scheduled	Room #: _____
Time: from _____ to _____	<input type="checkbox"/> Notified	_____
<b>3.</b> Day: _____	<input type="checkbox"/> Scheduled	Room #: _____
Date: _____	<input type="checkbox"/> Scheduled	Room #: _____
Time: from _____ to _____	<input type="checkbox"/> Notified	_____
<b>4.</b> Day: _____	<input type="checkbox"/> Scheduled	Room #: _____
Date: _____	<input type="checkbox"/> Scheduled	Room #: _____
Time: from _____ to _____	<input type="checkbox"/> Notified	_____
<b>5.</b> Day: _____	<input type="checkbox"/> Scheduled	Room #: _____
Date: _____	<input type="checkbox"/> Scheduled	Room #: _____
Time: from _____ to _____	<input type="checkbox"/> Notified	_____
<b>6.</b> Day: _____	<input type="checkbox"/> Scheduled	Room #: _____
Date: _____	<input type="checkbox"/> Scheduled	Room #: _____
Time: from _____ to _____	<input type="checkbox"/> Notified	_____