

A-Z Learning Services Request Form

Thank you for your interest in our services. Please complete this form and send it back to A-Z Learning Services, Student Development Centre, via InterOffice mail or email.

Instructor: _____
Email address: _____
Course Code: _____
Course Duration: _____

Service Requested

- Academic-Zone access
- Numeracy-Zone
- Essay-Zone
- Essay-Zone + Aboriginal Focus Writing
- Essay-Zone + Business Grammar
- Essay-Zone + Advanced Grammar
- Essay-Zone + Essential Grammar
- Advanced Grammar + Essential Grammar
- Grammar and Business Writing (Coop)

Post-Quiz date: _____

or

from _____ to _____

- In-Class Order-a-Workshop

Workshop Topic: _____

Date: _____

Location/Room: _____

Number of Students: _____

Extra Details: _____

If you have any questions about this form or any of our services, please contact A-Z Learning Services ext. 5774 or email learning@brocku.ca.