**DCE – A Fall 2020 Teaching Availability Form**

TO: [**Enter your name here]**

From: **[Enter your Dean’s name here]**

Subject: **DCE Teaching Availability for Fall 2020**

**Please complete the form below to indicate your availability to teach in the Fall 2020 semester**

| Days(s) of the Week | Times (a.m. and p.m.) |
| --- | --- |
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**Please indicate those course(s) in your work area(s) that you are interested in teaching and would accept**

| Course# | Section | Course Title | ROOM FEATURES REQUIRED(Please see feature code below) |
| --- | --- | --- | --- |
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**Please be specific regarding any special room requests using the Classroom Feature Codes below and write your selection(s) under the "Room Features Required" Column:**

TA - Tabled Room CC- Computer Classroom MS - Math Software Z - Other

Please return this form to me by no later than **February 28, 2020**. If not returned by this date we will assume that you do not wish to teach this semester.

**Work Area(s): [Enter your Work Area here]**

**Name (please print):**

**Telephone #:**

**Signature: Date:**

**Note: This memorandum does not constitute a guarantee or agreement that any particular course or time will be offered or available.**