**NHS Computer Lab Request Form**

**(Page 1 of 2)**

* Please attach this computer lab usage form to your OnCourse lesson plans **and** submit it to Mrs. Bouknight at least five school days in advance.
* Either Mrs. Bouknight or Mrs. Ward will add your class to the computer lab schedule after you have submitted both of these pages and will send you a confirmation of your request.
* Teachers and students are required to follow all of the NHS Computer Lab Norms.

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| --- | --- |
| Teacher: |  |
| Date of form submission: |  |
| Date of computer lab use: |  |
| Class Block/ Period: |  |
| Detailed Description of Activity: |  |
| Standard(s)/Indicator(s) addressed: |  |

**NHS Computer Lab Request Form (Page 2 of 2)**

**115 B Days ONLY (25 computers) 403 Lab (19 computers) 410 Lab (26 computers)  Media Center (30 computers)**

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| --- |
| Teacher: |
| Date of computer lab use: |
| Class Block(s)/ Period(s): |

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| --- | --- | --- | --- | --- | --- | --- |
| **Computer** | **Seating Chart- list student names under the appropriate blocks/periods you are requesting** | | | | | |
| **Block/Period** | Example: 1A |  |  |  |  |  |
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| 28 |  |  |  |  |  |  |
| 29 |  |  |  |  |  |  |
| 30 |  |  |  |  |  |  |