VIRGINIA WESTERN

WE'LL TAKE YOU THERE >

Office of Disability Services

Request of Books in Alternative Format

Contact Information (Please Print Neatly)	
Name:	Today's Date:
Emplid:	Phone:
VWCC Email: @email.vccs.edu	(optional) Other Phone:

Computer Information			
• **Internet Connection** – If you have not done so already, your laptop computer **must** be configured to use VWCCWiFi. • **You can visit the Help Desk in the Business Science Building, Room M273, to make sure your computer is correctly configured**.			
Laptop Login or Password: (If needed)		My laptop is VWCC Wi-Fi Configured:	☐ YES ☐ NO
Drop-off date/time:		Pick-up date/time:	
Receiving Staff:		Returning Staff:	

Read and initial each of the requirements below.

- _____ My laptop computer IS configured to use VWCCWiFi.
- _____ I understand Disability Services will need a minimum of 24 hours to complete download(s).
- _____ I understand incomplete requests will not be processed.

I have read and understand the requirements for requesting books in alternative format. (If you have specific directions, questions or a comment, use the section below.)

Sign: _____ Date _____

Student Comments

_____

_____

_____

_____

YOU MUST COMPLETE **ALL** OF THE REQUESTED INFORMATION PER BOOK.

Book Request #1			
INSTRUCTOR		COURSE AND SECTION #	
ISBN #		EDITION AND YEAR	
BOOK TITLE			
BOOK AUTHOR(S)			
I WOULD LIKE TO DOWNLOAD TO:	☐ PC	☐ MAC	☐ CD - DAISY READER

Book Request #2			
INSTRUCTOR		COURSE AND SECTION #	
ISBN #		EDITION AND YEAR	
BOOK TITLE			
BOOK AUTHOR(S)			
I WOULD LIKE TO DOWNLOAD TO:	☐ PC	☐ MAC	☐ CD - DAISY READER

Book Request #3			
INSTRUCTOR		COURSE AND SECTION #	
ISBN #		EDITION AND YEAR	
BOOK TITLE			
BOOK AUTHOR(S)			
I WOULD LIKE TO DOWNLOAD TO:	☐ PC	☐ MAC	☐ CD - DAISY READER

Book Request #4			
INSTRUCTOR		COURSE AND SECTION #	
ISBN #		EDITION AND YEAR	
BOOK TITLE			
BOOK AUTHOR(S)			
I WOULD LIKE TO DOWNLOAD TO:	☐ PC	☐ MAC	☐ CD - DAISY READER