# Lansing Community CollegeArts & Sciences DivisionTEACHING SCHEDULE PREFERENCE

**Return to Arts & Sciences Division Office** via:

* + - electronic to: asd-div-service@lcc.edu
		- deliver to: Arts & Sciences Building, Room 1117
		- mail to: Arts & Sciences, Division – A&S 1117, Lansing Community College, 419 N. Washington Square, Lansing, MI 48933

**Effective staffing achieves the best possible fit between instructors and course delivery while also meeting student, program, and department needs. Please be aware that requests for specific courses, days/times, credit hours (workload), or room type cannot be guaranteed. If you do not return this preference form by the due date, you may not receive an assignment. Changes in work scheduling and staffing may impact the**

**ability to meet preferences.**

| **NAME** *(last, first)***:**  | **BANNER ID #: X00**  |
| --- | --- |
| **LCC PHONE EXTENSION:**  | **HOME PHONE:**  |
| **In which academic areas are you requesting teaching?**[ ]  BSE [ ]  CMA [ ]  Integrated ENGL (IE) [ ]  MCS [ ]  SCI [ ]  SSH | **Number of total credit hours would you like to teach?** |
| Have you completed online instructor training (MVU, CTE, or other training)?**[ ]** Yes [ ]  No | Are you willing to teach online or hybrid?**[ ]** Online **[ ]** Hybrid **[ ]** Both **[ ]** Neither |
| Check all locations where you are willing to teach:[ ]  All Campuses[ ]  Main Campus[ ]  LCC East[ ]  LCC West[ ]  Livingston [ ]  Online [ ]  Other | Overall Comments:        |

[ ]  Please check here if you are not requesting any courses for this semester but wish to be considered in the future.

In order of preference, list the courses(s) you wish to be considered for teaching.
Special room types are available in limited quantity. Where necessitated by pedagogy, please indicate preferred room type using the following codes: CL=Computer Lab; L/L=Lecture/Laptop; LP=Laptop; SB=Smartboard; IB=Interactive Board; MR=Media Room; OT=other- please provide detail in “Overall Comments” above.
**\*NOTE: You will only be considered for courses you have been credentialed to teach thru Academic Affairs.**

| Course Code/Title | Room Type (Optional) |
| --- | --- |
| 1.      |       |
| 2.      |       |
| 3.       |       |
| 4.       |       |
| 5.       |       |

Put an “X” on the days and times when you are **available** to teach:

|  | Monday | Tuesday | Wednesday | Thursday | Friday | Saturday | Sunday |
| --- | --- | --- | --- | --- | --- | --- | --- |
| 08:00 – 10:00 |       |       |       |       |       |       |       |
| 10:00 – 12:00 |       |       |       |       |       |       |       |
| 12:00 – 02:00 |       |       |       |       |       |       |       |
| 02:00 – 04:00 |       |       |       |       |       |       |       |
| 04:00 – 06:00 |       |       |       |       |       |       |       |
| 06:00 - 08:00 |       |       |       |       |       |       |       |
| 08:00 – 10:00 |       |       |       |       |       |       |       |