

Instructor's Checklist for PRTC Documents
Please return relevant documents to the PRTC in this envelope

Instructor: _____

Course Name & Number: _____

All Users:

- Faculty Registration Form (enclosed)
- Copy of classlist
- Copy of syllabus
- PRTC Orientation Tour Booked

(Date of Tour)

(Time of Tour)

Test Library Users:

- List of test titles

Video Therapy Room Users:

- Block Booking Request Form (enclosed)