

# Faculty Support Center Work Request Form

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Name \_\_\_\_\_ Dept. \_\_\_\_\_ Phone \_\_\_\_\_ Date in \_\_\_\_\_ Time in \_\_\_\_\_ Date Needed \_\_\_\_\_

Classroom  Administrative  Research  Personal  Other (Explain) \_\_\_\_\_

## B&W COPY SERVICE

\_\_\_\_\_ Number of copies  
\_\_\_\_\_ Number of originals

**Check all that apply: (NOTE: All copies will be run double-sided unless specified below.)**

\_\_\_\_\_ Single-sided  
\_\_\_\_\_ Three-hole punch  
\_\_\_\_\_ Collate  
\_\_\_\_\_ Staple  
\_\_\_\_\_ Color paper

(Specify color: \_\_\_\_\_)

**Additional instructions:** \_\_\_\_\_  
\_\_\_\_\_

## SCAN SERVICE

**Please specify:**

Graphic (CANNOT be manipulated—for viewing purposes only)  
 Text (Saved as a Word file so it can be manipulated if necessary)

**Which format:** (check one)

PDF  JPG

**Additional instructions:** \_\_\_\_\_  
\_\_\_\_\_

Scanned by: \_\_\_\_\_

## WORD PROCESSING SERVICE

**Please specify format:**

Word  PowerPoint  
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**Additional instructions:** \_\_\_\_\_  
\_\_\_\_\_

**Office use only:** Date completed \_\_\_\_\_ Time \_\_\_\_\_ Initials \_\_\_\_\_ Charge if personal \$ \_\_\_\_\_