



CENTER FOR TEACHING  
LEARNING AND EXTENDED STUDIES

**Blackboard Training or Consultation Request -Form**

Please use this form to request training or individual consultation with the implementation and utilization of the Blackboard platform.

**Departmental Training Request**

Department \_\_\_\_\_ Department Chair Contact \_\_\_\_\_

Type of Blackboard Training Requested: \_\_\_\_\_

Three Date and Time Options:

Date	Time

I understand that our department will need to provide a computer lab for training.

**Consultation Request**

Instructor \_\_\_\_\_ Full Time Faculty  Yes  No Contact \_\_\_\_\_

Blackboard Training Requested: \_\_\_\_\_

Three Date and Time Options:

Date	Time

On a scale of 1-5, with 1 being new user and 5 being expert, how would you rate your Blackboard use and knowledge? \_\_\_\_\_

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**CTLES Use Only:**

Date Received: \_\_\_\_\_ Service Date: \_\_\_\_\_

Type of Contact (phone, face-2-face, web-conference): \_\_\_\_\_

Follow up required?  Yes  No

Comments: