



Accessibility Resources

ALTERNATIVE TEXTBOOK REQUEST

I, _____, am requesting an alternative textbook for the following courses for _____ semester 20____.

1. Course Prefix & Number: _____ Instructor: _____
Course Name: _____ ISBN #: _____
Textbook Title: _____ Author: _____

2. Course Prefix & Number: _____ Instructor: _____
Course Name: _____ ISBN #: _____
Textbook Title: _____ Author: _____

3. Course Prefix & Number: _____ Instructor: _____
Course Name: _____ ISBN #: _____
Textbook Title: _____ Author: _____

4. Course Prefix & Number: _____ Instructor: _____
Course Name: _____ ISBN #: _____
Textbook Title: _____ Author: _____

5. Course Prefix & Number: _____ Instructor: _____
Course Name: _____ ISBN #: _____
Textbook Title: _____ Author: _____

6. Course Prefix & Number: _____ Instructor: _____
Course Name: _____ ISBN #: _____
Textbook Title: _____ Author: _____

7. Course Prefix & Number: _____ Instructor: _____
Course Name: _____ ISBN #: _____
Textbook Title: _____ Author: _____

8. Course Prefix & Number: _____ Instructor: _____
Course Name: _____ ISBN #: _____
Textbook Title: _____ Author: _____

The above is a list of all the alternative texts that I am requesting. I understand that if there are any changes it is my responsibility to notify Accessibility Resources immediately.

Signature: _____ **Date:** _____