## Blended (Infrequent Meeting) EMS Request

SUNY Cortland Registrar's Office

This form is used to request placement for blended sections that meet infrequently. Hybrid sections meeting weekly are scheduled via Banner. Blended scheduling is managed via EMS. As a result, these do not appear in building/room assignments in the schedule of classes. *Blended reservations for SUNY Cortland Downtown, Memorial Library and the Mohawk Valley Graduate Center must be made through their respective space managers.*

Term: _____ CRN: _____ Subject: _____ Number: _____ Section: _____ Dept: _____

Instructor: _____ Instructor Email: _____

### Meeting Dates (List All Dates)

Meeting times must conform to standard class times unless they are meeting specialized locations or labs. (Attach additional sheets if needed.)

☐M ☐T ☐W ☐R ☐F ☐S ☐R Date: _____ Start:_____☐AM ☐PM End:_____ ☐AM☐PM

☐M ☐T ☐W ☐R ☐F ☐S ☐R Date: _____ Start:_____☐AM ☐PM End:_____ ☐AM☐PM

☐M ☐T ☐W ☐R ☐F ☐S ☐R Date: _____ Start:_____☐AM ☐PM End:_____ ☐AM☐PM

☐M ☐T ☐W ☐R ☐F ☐S ☐R Date: _____ Start:_____☐AM ☐PM End:_____ ☐AM☐PM

☐M ☐T ☐W ☐R ☐F ☐S ☐R Date: _____ Start:_____☐AM ☐PM End:_____ ☐AM☐PM

☐M ☐T ☐W ☐R ☐F ☐S ☐R Date: _____ Start:_____☐AM ☐PM End:_____ ☐AM☐PM

☐M ☐T ☐W ☐R ☐F ☐S ☐R Date: _____ Start:_____☐AM ☐PM End:_____ ☐AM☐PM

☐M ☐T ☐W ☐R ☐F ☐S ☐R Date: _____ Start:_____☐AM ☐PM End:_____ ☐AM☐PM

☐ Check here to have this request included in the course notes on the public schedule of classes.

### Classroom Request

Please note: blended meetings are placed after standard classes, and requested rooms may not be available. For this reason, you may optionally identify a specific room, but must identify required features for optimal placement. Please provide any notes that might help with identifying room options.

☐ This course is using specialized department space (identify below).

Room(s) Preferred _____ Min. Seating Cap.: _____

☐Seminar ☐Lecture Hall ☐Technology ☐Tables ☐Tablets ☐Computer Lab ☐Gym ☐Other (List Below)

Notes: _____

Instructor or Chair Signature: _____

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