

# STA Data Collection Form

First Name:	Last Name:	Banner ID:	Faculty Contract Instructor	Department:						
Reason for Request (please provide <b>description</b> below):										
Medical:										
Administrative:										
Academic:										
Other:										
<b>Section A: Unavailable Time Slot(s)</b>										
Column I = Instructors: Mark <b>unavailable</b> time slot(s) with an X										
Column AT = Departmental Administrator: Mark appropriate level of categorization – 1,2,3 or (N/A) Not Approved										
	Monday		Tuesday		Wednesday		Thursday		Friday	
Column	I	AT	I	AT	I	AT	I	AT	I	AT
8:30am–9:30am										
9:30am–10:30am										
10:30am–11:30am										
11:30am–12:30am										
12:30pm–1:30pm										
1:30pm–2:30pm										
2:30pm–3:30pm										
3:30pm–4:30pm										
4:30pm–5:30pm										
6:00pm–7:00pm										
7:00pm–8:00pm										
8:00pm–9:00pm										
9:00pm–10:00pm										
Category levels must be assigned by the Chair/Director										
<u>Category 1 (Legislative Requirements)</u> Carleton Human Rights Policy			<u>Category 2 (Reported Circumstances)</u> A medical condition not covered by Category 1 Family/personal issues of a serious nature, other official academic responsibilities				<u>Category 3 (May Accommodate)</u> Category 3 requests will be considered and will be accommodated if possible			
Section B.1: Location Restrictions/Requirements; or										
Section B.2: Modification of General Parameters										
Special Arrangement Details Instructor to complete							Level of Categorization AT to indicate level: 1, 2, 3 or NA (not approved)			
Signature of Instructor:							Date:			